



Washington State Health Care Authority

INSURANCE SYSTEM MANUAL

JANUARY 2007
(Higher Ed & Employer Group Medical Only Version)

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INTRODUCTION

The purpose of this manual is to assist you with the data entry of the subscriber information that affects Health Care Authority (HCA) sponsored insurance coverage. The following instructions pertain to information relevant to HCA insurance ONLY. If you have questions about the insurance screens or any of the insurance procedures contained in this manual, please contact:

HCA Training and Outreach
1-800-700-1555
asktraining@hca.wa.gov

Note: Reference to “spouse” in this manual includes qualified same sex domestic partners.

Note for Medical Only Groups: Please disregard information that relates to dental in this manual.

ACCESSING THE HCA INSURANCE SYSTEM SCREENS

The first screen to appear when you enter the system is the “Message 10” screen.

MESSAGE10 TERMINAL: N4Y120E

WELCOME TO THE STATE OF WASHINGTON
AUTHORIZED USE ONLY

FOR ASSISTANCE, PLEASE CALL YOUR HELP DESK

IF YOU ARE AUTHORIZED, TYPE YOUR SERVICE
IDENTIFIER AND PRESS <ENTER>

1. --

1. At the cursor, type **CICP3**
Press **Enter**

CICS Sign-on
Type your user id and password:

User id	==>	2. --
Pass word	==>	3. *
Language	==>	
New Password	==>	

PF 3 = End
DFHCE3520 Please type your user id.

2. At the cursor, type your **USER ID** (7 characters)
Press **Tab** to move cursor to the **PASSWORD** field
3. Type your **PASSWORD*** (must be 8 characters, no spaces - see password standards and tips on pages 5 and 6).
Press **Enter**

* NOTE: If you need assistance with your CICP3 password, contact the system security designee at your agency or contact Department of Information Systems at (360) 902-3149 or (360) 902-3106.

4. --

DFHCE3549 Sign-on is complete (Language E).

4. At the cursor, type **PAY1**
Press **Enter**

***GOOD AFTERNOON - PLEASE ENTER SIGN-ON INFORMATION ***

***** PERSONNEL PAYROLL ONLINE SYSTEMS *****
***** OPERATOR IDENTIFICATION *****

AGENCY: **5.** -- SUB-AGENCY: **6.** SSN: **7** PASSWORD: **8 ***
NEW PASSWORD:

SELECTION: **9.**

HELP: PRESS PF1 FOR ONLINE INSTRUCTION

*** YOU WILL BE ACCESSING PRODUCTION FILES ***

***** TO LEAVE THE SYSTEM FROM ANY SCREEN *****

CLEAR - EXIT

10. PF12 - EXIT AND LOGOFF

ENTER - NEXT SELECTION, PF1 - HELP, PF3 - SYSTEM MENU

5. At the cursor, type your **AGENCY** code
6. Type your **SUB-AGENCY** code
7. Type your **SOCIAL SECURITY NUMBER**
8. Type your **PASSWORD*** (8 characters, no spaces – see password standards and tips on pages 5 and 6). Press **Tab** to move cursor to the **SELECTION** field
9. Type **A.01** Press **Enter**
10. To exit the system from any screen, press the **PF12** key.

- Higher ED: If you need assistance with your Pay1 password, contact the system security designee at your agency or contact HRISD at (360) 664-6400 or e-mail helpdesk@dop.wa.gov.
- Employer Groups : If you need assistance with your Pay1 password, contact HCA at 1-800-700-1555 or e-mail at pebbsvc@hca.wa.gov
-

New Password requirements

- Must be 8 characters in length (previously could be 5 to 8 characters).
- Must contain at least one number, e.g., 0, 1, 2,9.
- Must contain at least one alphabetic character, e.g., a, b, c,z.
(Note: Lower case alphabetic in user ids and passwords are converted to upper case before processing, so it doesn't matter how you enter them.)
- Must contain at least one of the following three special characters: #, \$, or @
(Note: No other special characters will be accepted in a password.)
- May not contain the first three to six consecutive characters of your name as it appears in the security database. *(For example, user John Barrymore cannot use joh, john, bar, barr, barry, or barrym anywhere in his password.)*
- May not contain your user id.

Valid Password Examples

(assume user id = JS00211 and user's name = John Smith in database)

\$ismksc9 (contains number, special character, and alphabetic)
b\$o#ca22 (contains numbers, special characters, and alphabetic)
m@129apy (contains numbers, special character, and alphabetic)

Invalid password examples

(assume user id = JS00211 and user's name = John Smith in database)

moneybag (contains alphabetic, but no number and special character)
moneyba2 (contains alphabetic and number, but no special character)
cev#ga2 (less than 8 characters long)
\$2749638 (contains numbers and special character, but no alphabetic)
js00211# (contains user's user id)
john#007 (contains part of user name, "john")
#2smi\$56 (contains part of user name, "smi")

Existing Password Requirements that Continue to Apply

- The security system maintains a history of each user's most recent five (5) passwords and does not allow their reuse.
- Personal user id passwords must be changed at least every 60 days.

Tips when Entering Your Passwords

Be careful when entering your eight-character password on TPX and TSO sign-on screens. They will now fill that input field and cause the cursor to advance to the "new password" input field. If you accidentally enter a character in that field then press enter, it will assume you are attempting a password change and prompt you to "re-enter new password for verification". You may press PF3 to escape the sign-on screen to start over.

Tips for Choosing Good Passwords

- Avoid obvious passwords. Do not use names of children, spouses, pets, favorite sports teams, birthdays, or similar personal things that others are also likely to know.
- Do not use anything that can be found in a dictionary. If you want to use a word, mix in special characters and numbers, or even intentionally misspell it, such as "#guvnor1" or "@2gether."
- Make up an acronym based on a song, a sentence, poem, or rhyme then mix in special characters and numbers to a length of 8, as in the following examples:
- "I Saw Mommy Kissing Santa Clause" (ism\$9ksc)
- "The Check Is In The Mail" (5#tciitm)
- "My Dog Fido Drools A Lot" (mdfdal@7)
- Do not use these examples....make up your own schemes!

Tips for Safeguarding Your Password

- NEVER tell your password to anyone, including coworkers.
- NEVER share your user id and password with others. You alone are responsible for what is done with your user id.
- Do not write your password down. A written password is more easily discovered than one committed to memory.
- Be careful when typing in your password. Make sure no one is looking over your shoulder.



DEFINITIONS

CURRENT PROCESS MONTH:

The monthly insurance invoicing is divided into three cycles due to the large number of PEBB participating agencies. "Current process month" is a term used to identify the specific period of time for which the insurance system is billing an agency. The beginning and end date of an agency's "current process month" depends upon which invoicing cycle the agency is in:

INVOICING CYCLE 1 - COBRA, SELF-PAY, SELF-PAY RETIREES and K12 SCHOOL DISTRICT ACTIVE EMPLOYEES

Current process month runs from approximately the 24th of one month through the 23rd of the following month. FOR EXAMPLE: The 24th of May through the 23rd of June is "Process Month June".

INVOICING CYCLE 2 - HIGHER-EDUCATION, DEPARTMENT OF RETIREMENT SYSTEMS and POLITICAL SUBDIVISIONS

Current process month runs from approximately the 27th of one month through the 26th of the following month. FOR EXAMPLE: The 27th of May through the 26th of June is "Process Month June".

INVOICING CYCLE 3 - STATE AGENCIES

Current process month runs from approximately the 1st one month, through the 30th or 31st of the following month. FOR EXAMPLE: The 1st of June through the 30th of June is "Process Month June".

LOWER LIMIT DATE:

The LOWER LIMIT DATE is three calendar months prior to the current process month. FOR EXAMPLE: if the current process month is June, the LOWER LIMIT DATE would be March 1st. The LOWER LIMIT DATE for an enrollment effective date would be March 1st. The LOWER LIMIT DATE for termination end dates would be March 31st.

RETRO PROCESS:

The system allows terminations and changes on-line as far back as the LOWER LIMIT DATE (see page 7). Incorrect effective or term dates should not be used unless HCA directs otherwise.

The HCA retro term policy revised January 1, 2004 allows for terminations and changes only to the system's lower limit date.

- **For retroactive terms/divorce/or deceased dates:** When entering a termination or a change, if you receive the error message "REQUIRES APPROVAL...ENTER REQUEST FOR APPROVAL ON THE A.56 SCREEN", ***do not proceed with the update! Back out of this screen by changing the command line to "A.56", type "A" (add) and press PF4. This will take you to the A.56 screen to enter your request. HCA will terminate the coverage back to the correct termination date.***
- **For adds and changes:** Adds and changes may be allowed prior to the lower limit date, subject to HCA's approval. Enter the add transaction with the requested date. If you receive the message, "REQUIRES APPROVAL... ..ENTER REQUEST FOR APPROVAL ON THE A.56 SCREEN", ***do not proceed with the update! Back out of this screen by changing the command line to "A.56", type "A" (add) and press PF4. This will take you to the A.56 screen to enter your request.***

FUTURE PROCESS:

YOU MAY ENTER MOST TRANSACTIONS **ONE** MONTH INTO THE FUTURE *. THE FUTURE ENTRY WILL PEND UNTIL THE FUTURE EFFECTIVE DATE IS EQUAL TO THE CURRENT PROCESS PERIOD. FOR EXAMPLE: If you access the system on April 15th and enroll an employee effective May 1st, the action will DISPLAY as a pending or future action until processing month May is reached. Then it will move to the CURRENT COVERAGE fields.

* **NOTE:** During open enrollment, health and dental plan changes with an effective date of January 1 may be entered **TWO** months into the future.

STATE AGENCY:

With the implementation of HRMS, state agencies will use the pay1 system for insurance only.

INSURANCE ONLY:

This term refers to all PEBB participating agencies that use the on-line system for insurance only.

HOME AGENCY:

This term refers to the agency responsible for the employee's insurance employer contribution and maintaining the insurance screens.

REVIEW OF THE COMMAND LINE

(LOCATED AT THE BOTTOM OF EACH SCREEN)

NEXT FUNCTION: TYPE: SSA: AGY: SUB: PAY ACTION:
ENTER-NEXT, PF1-HELP, PF2-RETURN, PF3-SYSTEM, PF9-HISTORY

NEXT FUNCTION:

ENTER your screen choice. The screens that contain information relevant to insurance are:
A.01, A.41, A.42, A.43, A.44, A.45, A.46, A.51, A.53, A.55, A.56. .

TYPE:

ENTER **"A"** (ADD), **"I"** (INQUIRE), or **"U"** (UPDATE).

SSA:

ENTER the social security number of the employee you want to access.

AGY:

ENTER your agency code.

SUB:

ENTER your sub-agency code, if applicable.

Your next choices are determined by your entry in the TYPE field.

- ♦ If you chose **"I"** (INQUIRE), your next choices are:

ENTER-NEXT, PF1-HELP, PF2-RETURN, PF3-SYSTEM, PF9-HISTORY

ENTER will take you to the next logical screen or the screen number you enter in the NEXT FUNCTION field.

PF1 will take you to on-line "HELP".

PF2 will return you to the personnel/payroll menu.

PF3 will take you to the system menu (Alpha Cross Reference and System Messages).

PF9 (when it shows on the command line) will take you to the history screens.

- ♦ If you chose "U" (UPDATE), your next choices are:

PF1-HELP, PF3-SYSTEM, PF4-CANCEL, PF10-UPDATE/ADD

PF1 will take you to on-line "HELP".

PF3 will take you to the system menu (Alpha Cross Reference and System Messages).

PF4 will cancel any changes if you decide not to update.

PF9 (when it shows on the command line) will take you to the history screens.

PF10 will update your changes.

- ♦ If you chose "A" (ADD), your next choices are:

PF1-HELP, PF3-SYSTEM, PF4-CANCEL, PF10-UPDATE/ADD

PF1 will take you to on-line "HELP".

PF3 will take you to the system menu (Alpha Cross Reference and System Messages).

PF4 will cancel any changes if you decide not to update.

PF9 (when it shows on the command line) will take you to the history screens.

PF10 will update the changes you make

***** A.01 - PERSON DATA *****

SOC SEC :	HOME AGY/SUB-AGY:		
LAST NAME:	SUFFIX:		
FIRST NAME:			
MIDDLE NAME:			
SHORT NAME:			
PHONE - BUSINESS/WORK:	HOME:		
ADDRESS LINE1 :	ADDR EFF DATE:		
ADDRESS LINE2 :			
ADDRESS LINE3 :	COUNTY:		
CITY:	ZIP CODE:		
BIRTHDATE:	STATE:	PERS W/DIS:	DIS-6 MO:
RACE:	GENDER:		ETHNIC:
A.A. PREF:	HISPANIC:	VET SVC YRS:	MOS: DAYS:
PROF LIC :	VET RET	EDUC :	
MAJOR :		DEGREE :	
UNBKN DT :		ANNIV D :	
SNRTY DT :		PERM ST :	
NEW SSA :			
P2-PRT :			
NEXT FUNCTION: A 01 TYPE: SSA:	AGY:	SUB:	PAY ACTION :
ENTER-NEXT SELECTION, PF1-HELP, PF2-RETURN, PF3-SYSTEM			

GENERAL SCREEN USAGE:

THE A.01 - PERSON DATA is the first screen established in the insurance enrollment process. A person record must exist before insurance can be enrolled.

When an employee works for more than one agency or sub-agency, only one can have the authority and responsibility for maintaining the person record. This agency/sub-agency is considered the home agency and is responsible for the employee's insurance.

The home agency lock is set when the employee is added to the A.41 - SUBSCRIBER DATA screen.

If your agency is responsible for an employee's insurance, but you do not have security for the A.01 - PERSON DATA screen, contact the agency shown at the top of the screen in the HOME AGENCY field and request a insurance agency transfer. For information on how to do an insurance transfer, see pages 19-22 (A.41 transfers)

SOCIAL SECURITY NUMBER:

Displays the social security number that was entered on the command line.

TO CORRECT A SUBSCRIBER'S SOCIAL SECURITY NUMBER:

- 1) Request the A.01 screen in UPDATE mode, using the incorrect social security number.
- 2) Move the cursor to the NEW SSA field in the lower left portion of this screen.
- 3) Key in the correct social security number.
- 4) Press PF10.

IF IT IS NECESSARY TO CREATE A TEMPORARARY DUMMY SOCIAL SECURITY NUMBER FOR THE SUBSCRIBER:

- 1) Use your agency number for the first 3 digits.
- 2) Use the numbers, "99", for the next 2 digits.
- 3) For the last four digits, use a number created by your agency. Example: 0001.

- 4) Create a log within your agency to keep track of numbers issued. Each number issued must be unique.
- 5) **IMPORTANT!** When the subscriber or employee receives a valid social security number, follow the steps for CORRECT A SOCIAL SECURITY NUMBER (above). This will automatically transfer all prior information to the NEW SOCIAL SECURITY NUMBER record.

HOME AGY/SUB-AGY:

Displays the home agency entered on the A.41 - SUBSCRIBER DATA screen. This is the OFM assigned number for each agency. If the employee is working for several agencies, the agency where the employee works the most hours would be the "home agency". The "home agency" needs to have the "home agency lock" and be responsible for the state share portion of the insurance benefit package.

LAST NAME:

ENTER the employee's last name.

SUFFIX:

ENTER the name suffix, i.e. JR, SR, II, III

FIRST NAME:

ENTER the employee's first name.

MIDDLE NAME:

ENTER the employee's middle name

SHORT NAME:

Displays from the long name fields (last, first, middle, and suffix). The short name can not be updated on the A.01 screen. If changes in the short name are needed, the A.99 'name change' screen will allow the short name to be changed.

PHONE – BUSINESS/WORK:

ENTER if adding an employee for the first time or if updating the home phone number. You must include area code.

PHONE – HOME:

ENTER the business or message phone (including area code) of the employee.

ADDRESS LINES 1, 2, 3:

Must be ENTERED when adding a person for the first time or updating the address. Displays if inquiring on previously added person. Each address line length is 30 characters. Use all 30 characters on address line 1 that are available by entering no punctuation (use Post Office punctuation standards). Address entered on line 1 will be the address used for mail delivery purposes. To remove any line of address, place your cursor at the beginning of the line and press the "ERASE EOF" key. **NOTE: When making address changes, don't forget to update the county and telephone number!**

ADDR EFF DATE:

Defaults to the current date when first establishing an employee's A.01 screen. **Must be updated if the address is changed.** ENTER the actual date (MMDDCCYY) of the move, if known. Otherwise ENTER the signature date on the employee's change form. Employees moving into or out of a carrier's service area are allowed to change health or dental plans. **NOTE: The effective date of the health or dental carrier change on the A.44 screen is the 1st of the month following the residence change.**

COUNTY:

Must be ENTERED when adding an employee for the first time. **NOTE: Don't forget to update the county code when changing an address!** An entry in this field will update the COUNTY field on the A.41 - SUBSCRIBER DATA screen. If you know the city but not the county, refer to the CITY-COUNTY CODE LIST on page 70 in this manual. Valid county codes are:

01 ADAMS	15 ISLAND	28 SAN JUAN
02 ASOTIN	16 JEFFERSON	29 SKAGIT
03 BENTON	17 KING	30 SKAMANIA
04 CHELAN	18 KITSAP	31 SNOHOMISH
05 CLALLAM	19 KITTITAS	32 SPOKANE
06 CLARK	20 KLINKITAT	33 STEVENS
07 COLUMBIA	21 LEWIS	34 THURSTON
08 COWLITZ	22 LINCOLN	35 WAHIAKUM
09 DOUGLAS	23 MASON	36 WALLA WALLA
10 FERRY	24 OKANOGAN	37 WHATCOM
11 FRANKLIN	25 PACIFIC	38 WHITMAN
12 GARFIELD	26 PEND OREILLE	39 YAKIMA
13 GRANT	27 PIERCE	Blank OUT OF
14 GRAYS HARBOR		STATE/COUNTRY

CITY:

ENTER if adding an employee for the first time or updating an address.

STATE:

ENTER if adding employee for the first time or updating an address. Valid codes are:

AL	ALABAMA	MT	MONTANA
AK	ALASKA	NC	NORTH CAROLINA
AR	ARKANSAS	ND	NORTH DAKOTA
AZ	ARIZONA	NE	NEBRASKA
CA	CALIFORNIA	NH	NEW HAMPSHIRE
CO	COLORADO	NJ	NEW JERSEY
CT	CONNECTICUT	NM	NEW MEXICO
DE	DELAWARE	NV	NEVADA
DC	DISTRICT OF COLUMBIA	NY	NEW YORK
FL	FLORIDA	OH	OHIO
GA	GEORGIA	OK	OKLAHOMA
HI	HAWAII	OR	OREGON
ID	IDAHO	PA	PENNSYLVANIA
IL	ILLINOIS	RI	RHODE ISLAND
IN	INDIANA	SC	SOUTH CAROLINA
IA	IOWA	SD	SOUTH DAKOTA
KS	KANSAS	TN	TENNESSEE
KY	KENTUCKY	TX	TEXAS
LA	LOUISIANA	UT	UTAH
MA	MASSACHUSETTS	VA	VIRGINIA
MD	MARYLAND	VT	VERMONT
ME	MAINE	WA	WASHINGTON
MI	MICHIGAN	WI	WISCONSIN
MN	MINNESOTA	WV	WEST VIRGINIA
MO	MISSOURI	WY	WYOMING
MS	MISSISSIPPI		

TERRITORY CODES:

AS	AMERICAN SAMOA
CM	NORTHERN MARIANA ISLANDS
GU	GUAM
PR	PUERTO RICO
TT	FEDERATED STATES OF MICRONESIA
TT	MARSHALL ISLANDS
TT	PALAU ISLANDS
VI	VIRGIN ISLANDS
ZZ	OUT OF COUNTRY

ZIP CODE:

ENTER the 5 or 9 digit zip code of the employee. For an address *out of country*, ENTER ZZ in the STATE field, which will allow the ZIP CODE field to remain blank or accept both alpha and numeric characters.

BIRTHDATE:

ENTER the employee's date of birth (MM DD CCYY)

Note: When correcting an employee's date of birth, re-key all fields (MM DD CCYY).

GENDER:

ENTER the gender of the employee.

M - Male, F - Female

NEW SSA: (near the bottom left of the screen)

Use this field to **correct** an employee's social security number. See SOCIAL SECURITY NUMBER on page 11.

Helpful Tips for the A.01 Screen

Employees moving into or out of a carrier's service area are allowed to change health or dental plans.

The effective date of the health or dental carrier change on the A.44 screen is the 1st of the month following the residence change.

When making address changes, don't forget to update the county and telephone number.

A.99 - NAME CHANGE SCREEN

The A.99 Name Change screen was developed to maintain the short name field. The additional name fields were added to the A.01 screen as a requirement for Social Security reporting. Only the short name field will be displayed on reports with the exception of DRS and IRS reporting which will have all name fields displayed. The short name field is created by using the long name fields (last, suffix, first, and middle names) when the name is added and/or updated on the A.01 Person Data screen. The short name field may also be created from the following processes:

- Internet applications (INET)
- Basic Health systems

The short name field is 20 characters long, which includes spaces between the suffix, first and middle name and allows for a comma following the last name.

***** A.99 - NAME CHANGE *****		MAPA991
SOC SEC	: 111 22 3333	HOME AGY/SUB-AGY: 111 D
FIRST NAME	: LUCKY	
MIDDLE NAME	: M	
LAST NAME	: PERSON	
SUFFIX	:	
SHORT NAME	: PERSON, LUCKY	
NEXT FUNCTION: A 99 TYPE: I SSA: 111 22 3333 AGY: 111 SUB: D		
INQUIRY ONLY PF1-HELP, PF2-RETURN, PF3-SYSTEM, ENTER-NEXT SELECTION		

To Access:

- Enter **A.99** on the main menu and ↔

Or

- Enter **99** in the **Next Function** field of any of the screens in the “A” system and ↔

In this order, the system will create the short name using the following format:

- 1) Entire last name or 20 characters still allowing room for a comma followed by a space
- 2) If there is a suffix and the suffix with a leading space and following comma **will fit** into the short name field it will display as: a space, suffix, comma and a following space
- 3) If there is a suffix and the suffix with a leading space and following comma **will not fit** into the short name field it will display as: a comma and following space. No attempt will be made to insert any portion of the first or middle names.
- 4) If there **is no suffix**, a comma followed by a space and as much of the first name as will fit, will be inserted into the short name field.
- 5) If there **is a suffix**, a comma followed by a space and as much of the first name as will fit, will be inserted into the short name field.
- 6) As much of the middle name with a space will be inserted into the short name.

Examples:

Long name

JOHNSON JR, JOHN ROBERT
SMITH-BARNEY III, JAMES PAUL
GONZALES DE SANTANA, MARIA ANN

Short name

JOHNSON JR, JOHN ROB
SMITH-BARNEY III, JA
GONZALES DE SANTAN,

Updating the short name field:

- Enter “**U**” in the **TYPE** field
- Enter the employee’s SSN
- Update the short name
- Press F10 to save the changes

This will automatically update the short name field on the A.01 screen.

****A.41 - SUBSCRIBER DATA****

SOC SEC NBR :	NAME :
HOME AGENCY :	HOME SUB AGENCY :
TRANSFER REASON :	TRANSFER EFF DATE :
HOME PHONE :	BUSINESS/MSG PH :
MAIL STOP :	COUNTY :
ELIG CODE :	ELIG EFF DATE :
QUALIFY REASON :	COBRA/SELF END DT :
PENDING ELIG CODE :	PENDING EFF DATE :
ORIG SOC SEC NUM :	ORIG AGENCY :
APPT STATUS :	AGY EFF/END DATE :
PAY METHOD :	MONTHLY SALARY :
MARITAL STATUS :	DECEASED DATE :
MARRIAGE DATE :	RETIRED DATE :
SPOUSE DIV/DEC DATE:	

NEXT FUNCTION: TYPE: SSA: AGY: SUB: PAY ACTION:
 ENTER-NXT, PF1-HELP, PF2-RTN, PF3-SYSTEM, PF9-HISTORY

GENERAL SCREEN USAGE:

Use the A.41 screen to:

- Establish the employee's insurance eligibility (sets the lock to the home agency)
- Transfer out an employee to another agency (releases the lock)
- Transfer in an employee (sets the lock)
- Terminate the employee's insurance coverage (releases the lock)

The employee's home agency is responsible for maintaining the insurance screens and paying the employer share of the benefit package. If an employee is not eligible for insurance, you will not need to access the pay1 system.

Higher Education: When employees become eligible for insurance, they will be enrolled in HEALTH, DENTAL, BASIC LIFE and BASIC LTD coverage. However employees may waive medical coverage for themselves and any or all dependents, if they have other medical coverage. **(Refer to page 39 for waiving medical on an employee, page 30 for waiving medical or dental on dependents).**

Employer Groups – Medical Only: If an new employee is waiving medical you will not need to access this screen until the employee returns to PEBB Benefits.

This screen always displays the subscriber's current data. You may look at previous eligibility data by pressing PF9 to access the A.51 - SUBSCRIBER HISTORY screen.

ENROLLMENT IN INSURANCE:

Access the A.41 screen in UPDATE mode. Move the cursor to the HOME AGENCY field. Enter your agency, sub-agency codes. Change the ELIGIBILITY CODE to "Y" and enter the ELIGIBILITY EFFECTIVE DATE of the insurance coverage. If the PAY METHOD is not a "D", change it to a "D".

If you are unable to access this screen in update mode, please refer to the "Helpful tips at the end of this section".

TRANSFERS:

Employer Group – Medical Only: You cannot transfer employees – disregard this section on transfers.

Higher Education: You can only transfer an employee to another, higher education, state agency or K-12 school district. Do not use the transfer fields to transfer an employee to a political subdivision, retirement, self-pay or COBRA. In those situations, you must terminate the insurance eligibility on the A.41 screen.

***IMPORTANT NOTE:** When a transfer occurs at any time prior to the end of the month, the losing agency is responsible for paying the state share for the entire month. The gaining agency will not be billed for state share until the month following the transfer date.*

The losing agency must enter **401** (transfer out code) in the TRANSFER REASON field, and the last day of the month (the losing agency is responsible for the insurance premiums for the entire month) in the TRANSFER EFF DATE field. Press PF10 to update.

The gaining agency must enter the new HOME AGENCY/SUB-AGENCY (this requires that you move the cursor to the home agency field), enter **201** (transfer in code) in the TRANSFER REASON field and the transfer-in date (should always be the first day of the month in which the new agency is responsible for the insurance premiums) in the TRANSFER EFF DATE field. Press F10 to update. This will set the home agency lock to the new agency. Do not update any other fields on this screen until after the transfer transaction. Additional changes to the A.41 screen fields will require a separate transaction.

TERMINATION OF EMPLOYMENT; DEATH OF EMPLOYEE; LEAVE WITHOUT PAY; REDUCTION IN FORCE; RETIREMENT:

Enter an "N" in the ELIG CODE field and in the ELIG EFF DATE field enter *the last day of the month* in which the employee last had eight hours of pay status. Press PF10 to update.

The functionality of these other insurance screens has not changed:

A.42 – DISPLAY LIST OF DEPENDENTS

A.43 – ADD, UPDATE AND ENROLL DEPENDENTS

A.44 – ENROLL AND UPDATE MEDICAL AND DENTAL COVERAGE

A.56 – REQUEST HCA TO UPDATE A RECORD

IMPORTANT NOTE: EMPLOYEES WHO TERMINATE, DECEASE, OR RETIRE OWE A FULL MONTH'S PREMIUM FOR THEIR OPTIONAL LIFE AND OPTIONAL LONG TERM DISABILITY. **PLEASE REMEMBER TO DEDUCT THE FULL PREMIUM FROM THEIR LAST PAYCHECK.**

SOCIAL SECURITY NUMBER:

Displays the social security number that was entered on the command line.

NAME:

Displays the subscriber's name from the A.01 screen. To make changes, use the A.01 screen.

HOME AGENCY:

INSURANCE ONLY: ENTER your home agency code.

HOME SUB/AGY:

INSURANCE ONLY: ENTER the home sub-agency code.

TRANSFER REASON:

(Do not use this field to transfer an employee to a political subdivision, retirement, self-pay or COBRA)

The LOSING AGENCY ENTERS a **401** code in the TRANSFER REASON field and the *transfer-out date* in the TRANSFER EFF DATE field. The GAINING AGENCY will then ENTER the new HOME AGENCY, a **201** action code in the TRANSFER REASON field and the *transfer-in date* in the TRANSFER EFF DATE field. This will set the home agency lock to the new agency. Do not update any other fields on this screen at this time. Changes to additional insurance data will require a separate transaction.

TRANSFER EFF DATE:

ENTER the transfer in or transfer out date (MMDDCCYY). See above for details on when to use this field.

HOME PHONE:

Displays from updates to the A.01 screen.

BUSINESS/MSG PHONE:

Displays from updates to the A.01 screen. .

MAIL STOP:

ENTER the mail stop of the employee's work location.

COUNTY:

Displays the county code from the A.01 screen.

ELIG CODE:

ENTER the code which describes the subscriber's eligibility. Only one eligibility code change is allowed per day. Valid codes for active employees are:

- Y - Eligible active employee (State, Higher Ed, ESD's, K12 School Districts and Political Sub-Divisions paying composite rate)
- X – Eligible active employee (ESD's, K12 School Districts and Political Sub-Divisions paying a tiered rate.
- N - Not eligible

ELIG EFF DATE:

When enrolling a subscriber, ENTER the coverage effective date.* (MMDDCCYY)

When terming a subscriber, ENTER the last day of the month.* (MMDDCCYY)

* COVERAGE EFFECTIVE AND END DATE RULES:

Effective January 1, 1996

- ♦ PERMANENT, SEASONAL, CAREER SEASONAL AND INSTRUCTIONAL YEAR EMPLOYEES: Coverage begins on the first day of the month following the date of employment. If the date of employment begins on the first working day of the month, coverage begins on the date of employment.
- ♦ NON-PERMANENT EMPLOYEES: Coverage begins on the first day of the seventh calendar month following the date of employment.
- ♦ PART-TIME FACULTY: Coverage begins on the first day of the month following the beginning of the second consecutive quarter/semester of half-time or more employment. If the first day of the second consecutive quarter/semester is the first working day of the month, coverage begins at the beginning of the second consecutive quarter/semester.
- ♦ COVERAGE WILL END on the last day of month in which employment ends (or through the end of the month that an employer contribution has been paid).

NOTE: For adds, terminations or changes prior to the LOWER LIMIT DATE (see page 8).

QUALIFY REASON: (For use by HCA only)

This field is used by HCA when enrolling an employee or dependent in COBRA.

COBRA/SELF END DATE: (For use by HCA only)

This field is used by HCA when enrolling an employee or dependent in self-pay or COBRA.

PENDING ELIG CODE:

Displays the code entered in the ELIG CODE field if the eligibility change is in the future or if terminating eligibility with an effective date in the current processing month.

To have pending eligibility erased, please call HCA at 1-800-700-1555

PENDING EFF DATE:

Displays the future effective date entered in the ELIG EFF DATE field or, if terminating eligibility with an effective date in the current processing month.

COALTN MBR & COALTN EFF DATE

Higher Education Note: Prior to July, 2006 the state has always had a single employer contribution. However, effective July 1, 2006 the employer contribution for *represented* general government and higher education employees will be \$744.00 per employee per month and \$618.00 per employee per month for *non-represented* employees. For purposes of health care benefit employer contribution amounts, an employee is considered to be represented if they are a member of a bargaining unit that is a signatory to the 2005-07 collective bargaining agreement negotiated between the State of Washington and the bargaining groups know collectively as the "Health Care Super Coalition." Thus, some employees are considered represented in that they belong to a union (and might even have a payroll deduction for union dues) but they are not considered represented for purposes of employer contribution.

These fields were initially be populated through interface files from central pay and higher-ed agencies.

For the conversion data, the date was 7/1/2006. After that, the date you enter will most often be the same as the Eligibility Effective Date.

New hires and changes will have to be entered in the new fields displayed above.

"Y" code = yes, member of the Health Care Super Coalition bargaining union

"N" code = no, not a member of this bargaining union.

Since this field only applies to higher-ed and central pay agencies, it has been protected to give the system time to determine if the employee is being enrolled in one of these. What this means is that you will not be able to get to the coalition field until after you press PF10 the first time. As soon as you press PF10, the system will determine if the employer is higher-ed or central pay and if so, the cursor will be moved to the protected field so you can update the flag.

If the eligibility effective date you are entering is a future day (not in the current month or retro), the system will default the coalition field to "Y" and you will need to change it to "N" in a separate transaction if the employee is not a coalition member.

ORIGINATING SSN: (For use by HCA and DRS only)

This field is used by HCA when enrolling an employee or dependent in self-pay or COBRA.

ORIG AGENCY: (For use by HCA and DRS only)

This field is used by HCA when enrolling an employee or dependent in self-pay or COBRA.

APPT STATUS:

INSURANCE ONLY: These codes are not required.

AGY EFF/END DATE:

If the eligibility code is one for enrolling a subscriber, this field will display the ELIG **EFFECTIVE** DATE field. If the ELIG CODE is N (not enrolled), this field will DISPLAY the ELIG **END** DATE.

PAY METHOD:

ENTER the payment method which corresponds to the subscriber's eligibility. The valid entries are:

"D" = Deduction

If the ELIG CODE entered on this screen is Y or X (active), ENTER "D" (deduction)

MONTHLY SALARY:

POLITICAL SUBS, ESD'S AND K-12: ENTER the monthly salary when enrolling an employee and ***remember to update this field when salary changes*** .

HIGHER EDUCATION: ENTER the monthly salary when enrolling an employee and ***remember to update this field when salary changes***.

MARITAL STATUS:

ENTER the marital status of the subscriber. Valid codes are:

"M" (Married)

"S" (Single)

NOTE: "M" must also be used when adding a same-sex domestic partner.

When entering a divorce date or termination date of a same sex domestic partner relationship, marital status must be changed to "S" (single).

DECEASED DATE: (For use by HCA and DRS only)

MARRIAGE DATE:

ENTER the last marriage date (MMDDCCYY) for a spouse or the established eligibility date for same sex domestic partner, if current status is married.

RETIRED DATE: (for use by HCA and DRS only)

SPOUSE DIV/DEC DATE:

Refer to page 8 if the divorce date is before the lower limit date.

Use this field when an employee divorces, the spouse has deceased or a same-sex domestic partner no longer qualifies. ENTER the divorce date (MMDDCCYY) of the subscriber or the spouse's date of death. This will default the RELATIONSHIP field of the spouse to an "X" and will automatically term the spouse's health, dental and life insurance effective the end of the month in which the divorce/death occurred.

Note: If the divorce or spouse deceased effective date entered in this field is in the current processing month, the system will display the spouse term date in the pending fields on the A.43screen. The spouse relationship will not be changed to "X" on the A.43 screen and the employee premium will not be recalculated on the A.44 until the next month's invoicing.

Helpful Tips for the A.41 Screen

Always check the A.41 screen prior to keying insurance.

If the A.41 is terminated (Eligibility Code = N) or

If Transfer Reason = 401 (transfer out):

You may proceed with the enrollment per the Transfer Instructions on pages 19-22.

If the A.41 is being held by another agency (the Eligibility Code does not = N):

Contact the Home Agency listed at the top of the A.41 and ask them to:

Key a termination or a transfer out (whichever is appropriate).

If the prior agency keys a termination, you must wait one day to enroll the insurance. A transfer may be keyed on the same day.

To have pending erased please call 1-800-700-1555.

If you are unable to key the correct termination or effective dates please do not key an incorrect date. Call 1-800-700-1555 or send an A.56 Request for HCA on-line transaction.

To prevent system problems:

- Always key eligibility screens in order

- Avoid keying multiple SSN changes on the same subscriber or dependent on the same day.

- Avoid keying enrollment and terminations on the same subscriber or dependent on the same day.

When reinstating eligibility on a subscriber who has been enrolled in the insurance system previously, the A.41 screen will automatically enroll the subscriber in the same carrier that was on the A.44 screen from the previous enrollment. You must remember to check the carrier on the A.44 and change the carrier code if the subscriber is not enrolling in the same medical and dental plan.

RELATIONSHIP:

Displays the dependent's relationship to the subscriber. Valid codes are:

S – Spouse or Same Sex Domestic Partner

C - Son

D - Daughter

F – Extended Dependent (formerly referred to as foster child)

2 - Spouse of surviving spouse (retirees)

X - Ex-spouse (defaults when the SPOUSE DIV/DEC DATE field is updated on the A.41 screen)

SSA:

Displays the social security number of each dependent.

NAME:

Displays the name of each dependent.

CURRENT HLTH/DNTL:

Displays the eligibility code "Y" if the spouse/dependent is currently enrolled.

Displays the eligibility code "N" if the spouse/dependent is currently not enrolled or has waived medical coverage.

PENDING HLTH/DNTL:

Displays the eligibility code "Y" if the dependent is pending enrollment.

Displays the eligibility code "N" if the dependent is pending termination or pending health waiver.

TO ADD A DEPENDENT, SEE PAGE 29

*****A.43 - SPOUSE AND DEPENDENTS DATA *****

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SUBSCRIBER SOC SEC   :                SUBSCR NAME           :

-----DEPENDENT DATA-----
DEPND SOC SEC       :                DEPEND NAME           :
GENDER              :                RELATIONSHIP          :
MEDICARE - A        :                BIRTHDATE            :
MEDICARE - B        :                QUAL REASON           :

CERTIFICATION IND:    CERT EFF DATE:    CERT END DATE:

          -----CURRENT-----          -----PENDING-----
          ENROLLED  EFF DATE  PREM DATE    ENROLLED  EFF DATE

HEALTH  :
DENTAL  :
PHYS/CLINIC:                DENTAL CLINIC:
ADDRESS (IF DIFFERENT FROM SUBSCRIBER):
  ADDR LINE 1:
  ADDR LINE 2:
  CITY:                STATE:                ZIP:
NEW DEPENDENT SSA:
NEXT FUNCTION:  TYPE:  SUBS SSA:                DEPEND SSA:
                  AGENCY:    SUB:    PAY ACTION:
ENT-NXT,PF1-HELP,PF2-RTN,PF3-SYS,PF4-CANC, PF9-HIST, PF10-UPDATE/ADD

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GENERAL SCREEN USAGE:

Note: Medical Only Groups disregard information about dental in this section.

THE A.43 - SPOUSE AND DEPENDENT DATA screen is used to enroll a subscriber's spouse and dependents in the insurance system. The information on this screen is unique to the individual dependent. Any changes that would affect a dependent's coverage will need to be done on their A.43 screen. **NOTE:** If the subscriber has no enrolled dependents you can skip this screen and proceed to the A.44 screen.

This screen always displays the dependent's most CURRENT enrollment data. You may look at previous enrollment data by pressing PF9 to access the A.53 - SPOUSE AND DEPENDENT HISTORY screen.

If you add dependents who are students (between age 20 and 24), extended dependents (relationship "F") or disabled children (over age 19), your entry will pend for HCA approval.

TO ENROLL SPOUSES OR DEPENDENTS:

Bring up the subscriber's A.42 screen. On the command line, type A.43 in the NEXT FUNCTION field, "A" (add) in the TYPE field, and press ENTER again. This will display another field on the command line called DEPEND SSA. Type in the dependent's social security number and press ENTER. This will give you a blank dependent screen with the cursor at the top for entering the dependent's data.

NOTE: If the employee declines medical coverage, dependents cannot be enrolled in medical. However, dependents may still be enrolled in dental coverage if you are higher education.

DUMMY DEPENDENT SSN: Every effort should be made to enter a valid SSN for a spouse or dependent. However, if it is necessary to create a temporary dummy SSN for a dependent without a valid social security number, use 999-99-0001, 0002, etc. **IMPORTANT! Notify the employee to report the dependent's correct social security number to you as soon as possible.**

TO TERM AN INELIGIBLE SPOUSE OR DEPENDENT:

SPOUSE: Divorces prior to the lower limit date see page 8. To cancel coverage for a divorced or deceased spouse or same-sex domestic partner, use the A.41 screen. On the A.41 screen, change MARITAL STATUS to single ("S") and enter the divorce date or the termination date of same-sex domestic partner relationship. For death of spouse/ same sex-domestic partners enter the date of death in the SPOUSE DIV/DEC DATE field. This transaction will automatically terminate the spouse/same-sex domestic partners health/dental coverage on the A.43 screen.

DEPENDENT: Dependent terms prior to the lower limit date see page 8. To cancel coverage for a dependent child who is no longer eligible, change the HEALTH ENROLLED and DENTAL ENROLLED fields to "N" and enter the date coverage is to be cancelled in the EFF DATE fields. Disabled and Extended Dependent terms can only be done by HCA. Send the enrollment change form to HCA or submit the request on the A.56 screen.

Note: Coverage must always be termed effective the last day of the month.

Note: If dependent term date is in the current processing month, the system will display the dependent term in the pending field on the A.43 screen and the premium will not be recalculated on the A.44 screen until the next month's invoicing.

NOTE: If an employee's eligibility is terminated on the A.41 screen, the transaction will automatically term any enrolled dependents on the A.43 screen.

TO WAIVE MEDICAL OR DENTAL COVERAGE FOR A SPOUSE OR DEPENDENT:

For current enrolled coverage ENTER an "N" (not enrolled) in the HEALTH ENROLLED or DENTAL ENROLLED field and the last day of the month in the EFF DATE field.

For new employee's dependents waiving both medical and dental coverage, do not add the spouse or dependent. Non-enrollment of coverage cannot be entered into the system at this time.

For new employee's dependents enrolling in medical and waiving dental or enrolling in dental and waiving dental, enter "Y" (enrolled) and "N" (not enrolled) in the HEALTH or DENTAL ENROLLED fields. The health or dental effective date will be the employee's insurance effective date. (**Note: The code "D" is not valid on the A.43 screen for waiving medical coverage.**)

Note: If the subscriber declines medical coverage: When a "D" is entered in the HEALTH ENROLLED field on the A.44 screen, the transaction will automatically change the "Y" to an "N" in the HEALTH ENROLLED field on the A.43 screen for each dependent who was enrolled. **NOTE: Dependents who waive medical will still be allowed to remain enrolled in dental coverage.**

Note: If the spouse/dependent termination of coverage date is in the current processing month, the system will display the dependent term in the pending health field on the A.43 screen and the premium will not be recalculated on the A.44 screen until the next month's invoicing.

TO RE-ENROLL COVERAGE THAT WAS WAIVED:

Dependents medical or dental coverage may be reinstated during any open enrollment with a January 1st effective date. ENTER a "Y" in the HEALTH or DENTAL enrolled field and the effective date in the EFF DATE field. **Re-enrollment at any other time requires proof of continuous coverage and HCA approval. Do not attempt to re-enroll coverage outside of open enrollment. Send enrollment forms and proof of loss of other coverage to HCA for processing.**

SUBSCR SOC SEC:

Displays the subscriber's social security number that was entered on the command line.

SUBSCR NAME:

Displays the subscriber's name.

DEPEND SOC SEC:

Displays the dependent's social security number that was entered on the command line.

DUMMY DEPENDENT SSN: Every effort should be made to enter a valid SSN for a spouse or dependent. However, if it is necessary to create a temporary dummy SSN for a dependent without a valid social security number, use 999-99-0001, 0002, etc. ***IMPORTANT! Notify the employee to report the dependent's correct social security number to you as soon as possible.***

To correct a dependent's social security number, refer to NEW DEPENDENT SSA on page 36.

DEPEND NAME:

ENTER the dependent's last name, comma, space, first name, space and middle initial. This field must include a comma and a space following the last name. If the dependent has only one name (e.g. Madonna), this field will allow it if the name is followed by a comma.

GENDER:

ENTER the gender of the dependent.
M = Male F = Female.

RELATIONSHIP:

ENTER the relationship code of the dependent to the subscriber. Valid codes are:

S – Spouse or Same Sex Domestic Partner *

C – Son

D – Daughter

F – Extended Dependent **

P - Ex-dependent parent

2 - Spouse of surviving spouse of retiree

X - Ex-spouse *** (defaults when divorce date is entered on the A.41 screen)

* **NOTE:** There must be a marriage date on the A.41 screen to add a spouse.

** **NOTE:** An extended dependent is any dependent child who is other than a natural child, stepchild or legally adopted child (eg. grandchild).

*** **NOTE:** If an employee remarries an ex-spouse, the relationship X (ex-spouse) must be changed to S (spouse) when re-enrolling the spouse on the A.43 screen.

STUDENTS, EXTENDED DEPENDENTS AND DISABLED DEPENDENTS:

Enter the dependent information (name, social security numbers, gender, relationship, birth date, qualify reason, enrolled codes for health and dental, and effective dates). Since extended dependents (relationship "F"), dependent students (qual reason "S") between age 20 and 24 and disabled dependents (over age 19) require approval by HCA, edits will prevent the enrollment to be effective until the certification has been completed by HCA. The enrollment code and dates will display in the PENDING fields until HCA keys in the certification, then move to the CURRENT fields.

MEDICARE - A: (For use by HCA and DRS only)

NOTE: The system automatically updates this field to "Y" effective the first of month in which the employee/retiree's spouse turns age 65.

BIRTHDATE:

ENTER the birthdate of the spouse or dependent (MMDDCCYY).

Note: When correcting a dependent's birthdate, you must re-key all fields (MMDDCCYY).

MEDICARE - B: (For use by HCA and DRS only)

QUAL REASON:

S – Student (enter "S" **only if dependent is over age 19**)

D – Extended Dependents

A – Disabled (enter "A" **only if dependent is over age 19**)

The enrollment will pend for HCA approval in the PENDING ENROLLED field. Send the Student Certification Change form, Extended Dependent Certification form, or the Certification of Dependent with Disabilities form for disabled dependents to the HCA for processing.

CERTIFICATION IND: (For use by HCA only)

This field is used by HCA when approving a dependent student, extended dependent or disabled child. ENTER "T" (Temporary) or "P" (Permanent). Note: Students and extended dependents can only have temporary certification.

CERT EFF DATE: (For use by HCA only)

This field is used by HCA when approving a student, extended dependent or disabled child.

CERT END DATE: (For use by HCA only)

This field is used by HCA when approving a student, extended dependent or disabled child.

STUDENT CERTIFICATION, EXTENDED DEPENDENT and DEPENDENTS WITH DISABILITY APPROVALS: (For use by HCA only)

STUDENT CERTIFICATION, EXTENDED DEPENDENT and DEPENDENT WITH DISABILITY DENIALS: (For use by HCA only)

HEALTH:

CURRENT - HEALTH ENROLLED:

ENTER a "Y" to enroll the spouse or dependent.

ENTER an "N" to term the spouse or dependent who is no longer eligible or for whom the employee has waived coverage.

CURRENT - HEALTH EFF DATE:

ENTER the dependent's effective date (MMDDCCYY) of enrollment or change (see effective date rules below). If the dependent's effective date is before the 16th day of the current month, the transaction will update the CURRENT ENROLLED and EFF DATE fields immediately. If the effective date is after the 15th day of the current month or in the future, it will display in the PENDING ENROLLED and PENDING EFF DATE fields until the next processing period is reached.

A full month's premium (if applicable) will be charged for dependents eligible before the 16th day of the current month, otherwise premium will begin the next month.

<i>Note: Coverage must <u>always</u> be termed effective the last day of the month.</i>
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SPOUSE AND DEPENDENT EFF DATE RULES

- ◆ For newly eligible employees, coverage for eligible dependents begins on the day the subscriber's coverage begins.
- ◆ Newly acquired dependents (except newborns and newly adopted children) coverage will begin on the first day of the month following the date of acquisition, unless the date of acquisition is the first day of the month.
- ◆ For same-sex domestic partner's and the children of same-sex domestic partner's, coverage will begin on the first day of the seventh month of establishing the relationship.
- ◆ Coverage for newborns begins at birth. Coverage for an adopted child begins on the day of adoption or the day the employee assumes legal obligation for support in anticipation of adoption.
- ◆ Coverage will end on the last day of month in which the dependent became ineligible.

CURRENT - PREM DATE:

Displays the date entered in the EFF DATE field if the ENROLLED HEALTH field is "Y" (yes).

PENDING - HEALTH ENROLLED:

Displays the eligibility code "Y" if the effective date of the dependent is after the 15th day of the current month, a future date or if transaction has pending for HCA approval of a student, extended dependent or disabled dependent.

Displays the eligibility code "N" if the date the dependent is being terminated or is declining medical coverage is a future date or if the dependent term date is in the current processing month.

- ◆ To erase a pending termination of coverage, ENTER an asterisk (*) in the HEALTH ENROLLED field and press PF10 to update.

PENDING - HEALTH EFF DATE:

Displays if the effective date of the dependent is after the 15th day of the current month, in the future or the transaction has pending for HCA approval of student, extended dependent or disabled dependent certification.

Also, displays the eligibility code "N" if the subscriber's eligibility is pending termination on the A.41 screen or if the dependent's medical or dental coverage is waived with a future effective date or if the dependent term date is in the current processing month.

DENTAL:

CURRENT - DENTAL ENROLLED:

ENTER a "Y" to enroll the spouse or dependent.

ENTER an "N" to term a spouse or dependent who is who is no longer eligible or who is waiving dental coverage.

CURRENT - DENTAL EFF DATE:

ENTER the dependent's effective date (MMDDCCYY) of enrollment or change. If the dependent's effective date is before the 16th day of the current month, it will update immediately and will display in the CURRENT ENROLLED AND EFF DATE fields. If the effective date is after the 15th day of the current month or in the future, it will display in the PENDING ENROLLED and PENDING EFF DATE fields until the next processing period is reached.

Note: Coverage must <u>always</u> be termed effective the last day of the month.

CURRENT - PREM DATE:

Displays the date entered in the EFF DATE field if the ENROLLED DENTAL field is "Y" (yes).

PENDING - DENTAL ENROLLED:

Displays the eligibility code "Y" if the effective date of the dependent is after the 15th day of the current month, a future date or if transaction has pended for HCA approval of a student, extended dependent or disabled dependent.

Displays the eligibility code "N" if the term date of the dependent is a future date.

Also, displays the eligibility code "N" if the subscriber's eligibility is pending termination on the A.41 screen.

PENDING - DENTAL EFF DATE:

Displays if the effective date of the dependent is after the 15th day of the current month, the date of enrollment or change is in the future or if the transaction has pended for HCA approval of student, extended dependent or disabled dependent certification.

REMEMBER: To cancel ALL coverage for a dependent, change both the HEALTH and DENTAL ENROLLED fields to "N" and ENTER the termination date in the EFF DATE fields.

PHYSICIAN-CLINIC:

ENTER the physician or clinic code from the employee's enrollment/change form. Most of the managed care plans require enrollees to choose a physician/clinic. Lists of physician/clinic codes are available from the carriers or on HCA's website. After you press PF10 to update, this information will display. ENTER this information for open enrollment and new employees only! You will **not** be required to keep this field updated. Employees who wish to change physicians after the initial enrollment should do so by contacting the carrier directly.

NOTE: THE PHYSICIAN/CLINIC CODE IS IMPORTANT INFORMATION FOR THE CARRIERS. The absence of the PHYSICIAN/CLINIC code will delay identification cards for your enrollees.

DENTAL CLINIC:

ENTER a valid code from the DELTACARE or REGENCE DENTAL participating dentist list. These plans require enrollees to choose a dentist. After you press PF10 to update, it will display. Enter this information for open enrollment and new employees only! You will **not** be required to keep this field updated. Employees who wish to change dentists after the initial enrollment should do so by contacting their dental plan directly. The Uniform Dental Plan (Washington Dental Services) does not require an entry in this field as enrollees are allowed to see any dentist.

NOTE: THIS IS IMPORTANT INFORMATION FOR THE DENTAL PLANS. The absence of the DENTAL CLINIC code will delay identification cards for your enrollees.

ADDRESS:

ENTER if dependent's address is different from subscriber.

NOTE: If the dependent's address is out of country, ENTER ZZ in the STATE field, which will allow the ZIP field to remain blank or accept both alpha and numeric characters.

NEW DEPEND SSA:

Use this field to **correct** an existing dependent's social security number. ENTER the dependent's correct social security number and press the PF10 key. All fields where the dependent's SSN occurs will be updated.

Helpful Tips for the A.43 Screen

Keying two different termination dates on the same day will cause problems with invoicing. Key terms 1 day apart from each other.

Coverage must always be termed at the end of the month.

Qual Reason "S" for student should only be entered if the dependent is over age 19.

Re-enrollment for previously waived coverage requires HCA approval outside of open enrollment. Do not attempt to re-enroll coverage on-line. Send the forms and proof of loss of other coverage to HCA for processing.

The physician/clinic code and the Dentist Name/Clinic Code are important for the carriers. The absence of these codes if required will delay identification cards for your enrollees.

*****A.44 - HEALTH AND DENTAL COVERAGE*****

SOCIAL SECURITY NUMBER:	NAME:
ELIGIBILITY TYPE:	EMPLOYER CONTRIBUTION:
=====HEALTH INSURANCE=====	
SUBSCRIBER ENROLLED:	HEALTH CHG DATE :
HEALTH CARRIER :	PHYSICIAN-CLINIC ID :
HEALTH MEDICARE A :	HEALTH MEDICARE B :
HEALTH EFF DATE :	HEALTH END DATE :
PREMIUM EFF DATE :	PREMIUM - EMPLOYEE :
NEW HEALTH CARRIER :	NEW CARRIER EFF DATE :
PENDING ENROLLMENT :	PENDING EFF DATE :
=====DENTAL INSURANCE=====	
SUBSCRIBER ENROLLED:	DENTAL CHG DATE :
DENTAL CARRIER :	DENTAL CLINIC ID :
DENTAL EFF DATE :	DENTAL END DATE :
PREMIUM EFF DATE :	PREMIUM - EMPLOYEE :
NEW DENTAL CARRIER :	NEW CARRIER EFF DATE :
PENDING ENROLLMENT :	PENDING EFF DATE :
NEXT FUNCTION: TYPE: SSA: AGY: SUB: PAY ACTION:	
ENT-NXT, PF1-HELP, PF2-RTN, PF3-SYS, PF4-CANC, PF9-HIST, PF10-UPDATE	

GENERAL SCREEN USAGE:

THE A.44 - HEALTH AND DENTAL COVERAGE screen is used to establish and update the subscriber's health and dental coverage. The HEALTH and DENTAL EFF DATES are defaulted to the eligibility effective date that was entered on the A.41 screen and the system will automatically enroll new subscriber's in the default carrier codes Z and 9 (no plan selected) when eligibility is established on the A.41 screen. To update the subscriber's selected plan or to make change to the subscriber's coverage, you will need to enter the effective date of the change in the CHANGE DATE fields and enter the carrier code.

Caution: *If a subscriber has been enrolled in the insurance system previously, the A.41 screen will automatically enroll the subscriber in the same carrier that was on the A.44 screen from the previous enrollment. You must remember to check the carrier on A.44 and change the carrier code if the subscriber is not re-enrolling in the same medical and dental plans.*

Employees may waive medical coverage for themselves and their dependents, if they have other medical coverage. The employee's enrollment form must identify the individuals for whom medical coverage is declined.

This screen always displays the subscriber's current coverage. You may look at previous coverage by pressing PF9 to access the A.51 - SUBSCRIBER HISTORY screen.

SOCIAL SECURITY NUMBER:

Displays the social security number that was entered on the command line.

NAME:

Displays the name of the subscriber.

EMPLOYER CONTRIBUTION:

Displays the state share contribution for active employees.

==HEALTH INSURANCE==

SUBSCRIBER ENROLLED:

Displays the eligibility code entered on the A.41 screen. NOTE: When **changing** medical carriers, **do not rekey the eligibility code in this field.**

WAIVING MEDICAL COVERAGE: Employees may waive medical coverage for themselves and any or all dependents, if they have other coverage. The employee's enrollment form must identify the individuals for whom medical coverage is waived.

- Higher ED: For currently enrolled employees declining medical, ENTER "D" (for waived) in this field and the last day of the month in which the form was signed in the HEALTH CHANGE DATE field.
- Employer Groups (Medical Only): Go to the A.41 Screen. Enter an "N" in the ELIG CODE field and in the ELIG EFF DATE field enter *the last day of the month* in which the employee waived coverage. Press PF10 to update.
- Higher ED: For newly eligible employees declining medical, ENTER "D" (for waived) in this field and the insurance effective date in the HEALTH CHANGE DATE field.
- Employer Groups: You will not need to enter information on newly eligible employees electing to waive medical.

Higher ED: When "D" (for waived) is entered on the A.44 screen, the employee's enrolled dependent's medical coverage will automatically be terminated ("N") on the A.43 screen. Dependents cannot be enrolled in medical coverage if the employee has waived medical. **NOTE: Employees who waive medical must still be enrolled in dental, life and LTD. Dependents who waive medical may still remain enrolled in dental and life coverage.**

Note: If the subscriber waive/term date is in the current processing month, the system will display the change in the pending health enrolled fields and the premium will not be recalculated on the A.44 screen until the next month's invoicing.

RE-ENROLLMENT IN MEDICAL COVERAGE: Employees may re-enroll in medical coverage during open enrollment with a January 1 effective date. Re-enrollment at any time other than open enrollment requires HCA approval. Do not attempt to re-enroll medical coverage outside of open enrollment. Please send the medical/dental change form and proof of loss of coverage to HCA.

HEALTH CHANGE DATE:

ENTER the effective date (MMDDCCYY) of the health plan enrollment or change of enrollment.

NOTE: When a subscriber changes plans due to moving out of their current plan's service area, the effective date of the new plan must be the **first of the month** following the date of the subscriber's move. Medical plan changes during open enrollment must have an effective date of January 1.

Current changes and changes retroactive to the LOWER LIMIT DATE will be updated immediately and will display in the HEALTH EFF DATE or HEALTH END DATE and PREMIUM EFF DATE fields.

Retroactive carrier changes with effective dates prior to the LOWER LIMIT DATE require approval and must be submitted in writing to HCA for review. ***Do not proceed with the update using an incorrect effective date! Back out of this screen by changing the command line to "A.44", type "I" (inquire) and press PF4.***

Future enrollment and changes may be one month into the future. **However, open enrollment carrier changes with an effective date of January 1 may be two months into the future.** Future eligibility changes will pend and display in the PENDING ENROLLMENT, PENDING EFF DATE fields until the future effective date equals the current process month. Future carrier changes will pend and display in the NEW HEALTH CARRIER, NEW CARRIER EFF DATE fields until the future effective date equals the current process period.

HEALTH CARRIER:

ENTER the code for the health carrier. This is a four character field. When the selected carrier code has fewer than four letters, you must TAB to move to the next field on this screen. ***Caution: When reinstating eligibility on a subscriber who has been enrolled in the insurance system previously, the A.41 screen will automatically enroll the subscriber in the same carrier that was on the A.44 screen from the previous enrollment. You must remember to check the carrier on A.44 and change the carrier code if the subscriber is not re-enrolling in the same medical plan.***

NOTE: If the subscriber's address on the A.01 screen is not within the service area for the carrier code entered, you will receive an error message "**WARNING...CARRIER INVALID FOR ZIP CODE SERVICE AREA**". When this message is received, cancel the transaction by pressing PF4 and check the carrier's service area listed in the Consumer Information Guide. If you believe you received the warning message in error, please call HCA at 1-800-700-1555.

Valid codes are:

C – GROUP HEALTH Classic	K – REGENCE Classic
CV- GROUP HEALTH Value (eff 1/07)	U – UNIFORM MEDICAL
CH – COMMUNITY HEALTH Plan Classic	Z – DEFAULT (no plan selected) **
D – KAISER Permanente Classic	
DV – Kaiser Permanente Value (eff 1/07)	

**** NOTE:** If the health carrier is left "Z" (no plan selected), after 90 days from the health effective date keyed, the system will automatically change the carrier to "U" (Uniform Medical).

NOTE: If a "W" is displayed next to the medical carrier name – this indicates an on-line open enrollment change via HCA's website.

FOR MEDICARE ELIGIBLE RETIREES AND/OR SPOUSES ONLY (HCA use only):

PHYSICIAN-CLINIC ID:

ENTER the physician or clinic code from the employees medical/dental enrollment/change form. Most of the managed care plans require subscriber's to choose a physician/clinic. Lists of physician/clinic codes are available from the carriers. After you press PF10 to update, it will display. This information should be entered for open enrollment and new employees only! You will **not** be required to keep this field updated. Employees who wish to change physicians after initial enrollment should do so by contacting the carrier directly.

NOTE: THE PHYSICIAN-CLINIC ID CODE IS IMPORTANT INFORMATION FOR THE CARRIERS. The absence of this information will delay identification cards for your enrollees.

HEALTH MEDICARE A: (For use by HCA and DRS only)

NOTE: The system automatically updates this field to "Y" effective the first of the month in which the employee/retiree turns age 65.

HEALTH MEDICARE B: (For use by HCA and DRS only)

HEALTH EFF DATE:

Displays the date that was entered in the HEALTH CHANGE DATE field if the SUBSCRIBER ENROLLED field is "Y" (yes).

HEALTH END DATE:

Displays the date entered in the ELIG EFF DATE field (A.41) when the ELIG CODE field on the A.41 screen is changed to "N" (not eligible).

For employees waiving medical coverage, displays the date entered in the HEALTH CHANGE DATE field when the SUBSCRIBER ENROLLED field is changed to "D" (for waived).

PREMIUM EFF DATE:

Displays the date that was entered in the HEALTH CHANGE DATE field.

PREMIUM - EMPLOYEE:

The system will calculate the subscriber's premium (if any) for medical coverage and display it in this field.

NEW HEALTH CARRIER:

Displays the code for the future carrier entered in the HEALTH CARRIER field. The future carrier code will move to the current HEALTH CARRIER field when the future effective date is equal to the current process period.

- ♦ To **change** the pending carrier, re-key the HEALTH CHANGE DATE and HEALTH CARRIER fields on the A.44 screen, press PF10 to update.

- ♦ To **erase** the pending carrier, ENTER an asterisk (*) in the HEALTH CARRIER field on the A.44 screen, press PF10 to update.

NEW CARRIER EFF DATE:

Displays the future carrier effective date (MM CCYY) entered in the HEALTH CHANGE DATE field. The future effective date will move to the HEALTH EFF DATE field when the future effective date is equal to the current process month.

PENDING ENROLLMENT (HEALTH):

Displays the eligibility code "Y" or "N" if the date entered in the A.41 ELIG EFF DATE field is a future date.

Also, displays the enrollment codes "D" (for waived) or "Y" (enrolled) entered in the SUBSCRIBER ENROLLED field on the A.44 screen if the employee is waiving or re-enrolling in medical coverage with a future effective date. or if the waive/term effective date is in the current processing month.

- ♦ To **erase** a pending waive or re-enrollment, ENTER an asterisk (*) in the SUBSCRIBER ENROLLED field on the A.44 screen, press PF10 to update.

Note: You will not be able to erase pending enrollment on the A.44 screen if there is pending enrollment on the A.41 - SUBSCRIBER DATA screen.

PENDING EFF DATE:

Displays the eligibility effective date entered in the A.41 ELIG EFF DATE field if the date is in the future or if eligibility is terminated with an effective date in the current processing month.. Also, displays the pending effective date if the employee is waiving or re-enrolling in medical coverage with a future effective date. Users may enter eligibility changes one month into the future.

==DENTAL INSURANCE==:

SUBSCRIBER ENROLLED:

FOR HIGHER-ED USERS: The eligibility code (Y or N) entered on the A.41 screen will display in this field. ***Employees who waive medical coverage must still be enrolled in dental coverage.***

NOTE: When ***changing*** dental plans, ***do not rekey the Y in this field.***

FOR EMPLOYER GROUP USERS ONLY: The eligibility code (Y) will automatically set from the eligibility enrollment (x) on the A.41 screen. **You must enter a "D" in this field along with the effective date to prevent, dental life and LTD from enrolling.**

DENTAL CHANGE DATE:

ENTER the effective date (MMDDCCYY) of the dental plan enrollment or change.

NOTE: When a subscriber changes plans due to moving out of their current plan's service area, the effective date of the new plan must be the ***first of the month*** following the date of the subscriber's move. Dental plan changes during open enrollment must have an effective date of January 1.

Current changes and changes retroactive to the LOWER LIMIT DATE will be updated immediately and will display in the HEALTH EFF DATE or HEALTH END DATE and PREMIUM EFF DATE fields.

Retroactive carrier changes with an effective date prior to the LOWER LIMIT DATE require approval and must be submitted to HCA in writing for review. ***Do not proceed with the update using an incorrect effective date! Back out of this screen by changing the command line to "A.44", type "I" (inquire) and press PF4.***

Future changes may be one month into the future. **However, open enrollment carrier changes with an effective date of January 1 may be two months into the future.** Future eligibility changes will pend and display in the PENDING ENROLLMENT, PENDING EFF DATE fields until the future effective date equals the current process month. Future carrier changes will pend and display in the NEW DENTAL CARRIER, NEW CARRIER EFF DATE fields until the future effective date equals the current process period.

DENTAL CARRIER:

ENTER the code for the dental carrier. This is a four digit field. When the selected dental code has fewer than four numbers, you must press TAB to move to the next field on this screen. ***Caution: When reinstating eligibility on a subscriber who has been enrolled in the insurance system previously, the A.41 screen will automatically enroll the subscriber in the same carrier that was on the A.44 screen from the previous enrollment. You must remember to check the carrier on A.44 and change the carrier code if the subscriber is not re-enrolling in the same dental plan.***

<p>NOTE: If the subscriber's address on the A.01 screen is not within the service area for the carrier code entered, you will receive an error message "<i>WARNING...CARRIER INVALID FOR ZIP CODE SERVICE AREA</i>". When this message is received, cancel the transaction by pressing PF4 and check the carrier's service area listed in the Consumer Information Guide. If you believe you received the warning message in error, please call HCA at 1-800-700-1555.</p>
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Valid codes are:

- 1 - UNIFORM DENTAL (WDS)
- 4 - DELTACARE DENTAL
- 7 - REGENCE DENTAL PLAN
- 9 - DEFAULT (no plan selected) *

* NOTE: When the dental carrier is left as "9" (no carrier selected), after 90 days the system will automatically change the carrier to "1" (Uniform Dental).

NOTE: If a "W" is displayed next to the dental carrier name - this indicates an on-line open enrollment change via HCA's website.

DENTAL-CLINIC ID:

ENTER a valid code from the DELTACARE or REGENCE DENTAL PLAN participating dentist list. These dental plans require enrollees to choose a dentist. After you press PF10 to update, it will display. ENTER this information for open enrollment and new employees only! You will **not** be required to keep this field updated. Employees who wish to change dentists after the initial enrollment should do so by contacting their dental plan directly. The Uniform Dental Plan (Washington Dental Services) does not require an entry in the field as enrollees are allowed to see any dentist.

NOTE: THIS IS IMPORTANT INFORMATION FOR THE DENTAL PLANS. The absence of this information will delay identification cards for your enrollees.

DENTAL EFF DATE:

Displays the date that was entered in the DENTAL CHANGE DATE field if the SUBSCRIBER ENROLLED field is "Y" (yes).

DENTAL END DATE:

Displays the date entered in the ELIG EFF DATE field when the ELIG CODE field on the A.41 screen is changed to "N" (not eligible). For retirees and other self-paying subscribers, displays the date entered in the DENTAL CHANGE DATE field on the A.44 screen when the CURRENT ENROLLED field is changed to "N" (not enrolled).

PREMIUM EFF DATE:

Displays the last date entered in the DENTAL CHANGE DATE field.

PREMIUM EMPLOYEE: (FOR HCA AND RETIREMENT SYSTEMS ONLY)

The system will calculate the self-pay premium and display it in this field.

NEW DENTAL CARRIER:

Displays the code for the future carrier entered in the DENTAL CARRIER field. The future carrier code will move the current DENTAL CARRIER field when the future effective date equals the current process period.

- ◆ To change the pending carrier, re-key the DENTAL CHANGE DATE, DENTAL CARRIER fields on the A.44 screen, press PF10 to update.
- ◆ To erase the pending carrier, ENTER an asterisk (*) in the DENTAL CARRIER field on the A.44 screen, press PF10 to update.

NEW CARRIER EFF DATE:

Displays the future carrier effective date (MM CCYY) entered in the DENTAL CHANGE DATE field. The future effective date will move to the DENTAL EFF DATE field when the future effective date is equal to the current process period.

PENDING ENROLLMENT (DENTAL):

Displays the eligibility code "Y" or "N" if the date entered in the A.41 ELIG EFF DATE field is a future date or if the dental term date is in the current processing month.

PENDING EFF DATE:

Displays the eligibility effective date entered in the A.41 ELIG EFF DATE field if the date is in the future. Users may key eligibility changes one month into the future.

Helpful Tips for the A.44 Screen

If the subscriber's address on the A.01 screen is not within the service area for the carrier code entered, you will receive an error message. "WARNING...CARRIER INVALID FOR ZIP CODE SERVICE AREA" When this message is received, cancel the transaction by pressing PF4 and check the carrier's service area listed in the Consumer Information Guide. If you believe you received the warning message in error, please call HCA at 1-800-700-1555.

The physician/clinic code and the Dentist Name/Clinic Code are important for the carriers. The absence of these codes if required will delay identification cards for your enrollees.

Employees who waive medical must still be enrolled in dental, life and LTD.

Re-enrollment in medical coverage: Employees may re-enroll in medical coverage during open enrollment with a January 1 effective date. Re-enrollment at any time other than open enrollment requires HCA approval. Do not attempt to re-enroll medical coverage outside of open enrollment. Please send the medical/dental change form and proof of loss of coverage to HCA.

**** A.53 - SPOUSE AND DEPENDENT HISTORY ****

```

SUBSCRIBER SSN      :                      NAME                      :
=====DEPENDENT DATA=====
DEPENDENT SSN       :                      DEPENDENT NAME         :
COVERAGE PER FROM   :                      DATE CREATED          :
      THRU           :                      CREATED BY            :
GENDER              :                      RELATIONSHIP           :
BIRTHDATE           :                      QUALIFY REASON         :
MARRIAGE DATE       :                      DIVORCE DATE           :

CERTIFICATION IND:    CERT EFF DATE:  CERT END DATE:
ADDRESS LINE 1:
ADDRESS LINE 2:
ADDRESS LINE 3:
CITY:                STATE:ZIP:
                     ENR CARR EFF-DATE END-DATE M/C-A M/C-B CLINIC-ID

HEALTH:
DENTAL:
NEXT FUNCTION:  TYPE:  SSA:COV-MO:
DEPENDENT SSA:
ENTR-NEXT, PF1-HELP, PF2-RETURN, PF3-SYSTEM, PF7-UP, PF8-DOWN

```

GENERAL SCREEN USAGE:

THE A.53 - SPOUSE AND DEPENDENT HISTORY screen is used to inquire on the historical eligibility and enrollment information of a subscriber's spouse and dependents. This screen is not used for the purpose of updating spouse or dependent's enrollment data. Changes to the spouse or dependent enrollment data on the A.43 or A.44 screen will result in the creation of history that appears on the A.53 screen. Also, changes to the MARRIAGE DATE or DIVORCE DATE fields on the A.41 screen will create history on the A.53 screen.

One of the key features of this screen is the **COVERAGE PERIOD FROM/THRU** fields. These fields represent the beginning and ending coverage periods that the dependent's historical eligibility information applies to. It is possible for a dependent to have multiple history records, however, they will not apply to the same coverage period(s).

FUNCTIONS:

The A.53 screen:

1. Inquires on spouse and dependent eligibility history records.
2. Scrolls up and down by coverage period from and thru dates in chronological order.

ACCESS:

This screen is accessed by pressing PF9 from the A.43 screen

History records are accessed by entering the social security numbers of the subscriber and the dependent, respectively, in the SSA and DEPENDENT SSA fields on the command line. The user also has the option of entering the month and year of the coverage month to inquire on specific history records (see the topic "[Selecting History Records](#)" in the EXAMPLES/SPECIAL HELP section for details).

EXAMPLES/SPECIAL HELPS:

1. Selecting History Records - This screen contains a field called COV-MO located on the NEXT FUNCTION command line. It is used to specify the coverage month the user wishes to view dependent history for. When a coverage month is entered, the system will access the history record that was "in effect" for the month entered. If no value is entered in the COV-MO field, the system will display the most current history record.

If the user enters a COV-MO for which there is no history record, the system will display the message "REQUESTED RECORD NOT FOUND".

2. Navigation To And From The Originating Screen - This screen can be accessed from the A.42 and A.43 screens by pressing PF9. In order to return back to the originating screen (either A.42 or A.43) the user can press PF2 while on the A.53 screen.

ACCESS:

This screen is accessed by pressing PF9 from the A.45 or A.46 screen.

History records are accessed by entering the social security number of the subscriber on the command line. The user also has the option of entering the month and year of the coverage month to inquire on specific history records (see the topic "Selecting History Records" in the EXAMPLES/SPECIAL HELP section for details).

EXAMPLES/SPECIAL HELPS:

1. Selecting History Records - This screen contains a field called COV-MO located on the NEXT FUNCTION command line. It is used to specify the coverage month to life and LTD history the user wishes to access. When a coverage month is entered, the system will access the history record that was "in effect" for the month entered. If no value is entered in the COV-MO field, the system will display the most current history record.

If the user enters a COV-MO for which there is no history record, the system will display the message "REQUESTED RECORD NOT FOUND"

2. Navigation To and From The Originating Screen - This screen can be accessed from the A.45 and A.46 screens by pressing PF9. In order to return back to the originating screen (either A.45 or A.46) the user can press PF2 while on the A.55 screen.

***** A.56 – REQUEST FOR HCA ON-LINE TRANSACTION *****			
SUBSCRIBER SSN	:		NAME:
HOME AGENCY	:		
REQUESTOR NAME	:		MAIL STOP:
REQUESTOR PHONE	:		
REQUEST EXPLANATION:			
<hr/>			
<hr/>			
<hr/>			
<hr/>			
<hr/>			
NEXT FUNCTION: TYPE: A SSA:			
ENTER-SELECTION, PF1-HELP, PF3-SYS, PF4-CANC, PF10-UPDATE			

GENERAL SCREEN USAGE:

THE A.56 – REQUEST FOR HCA ON-LINE TRANSACTION screen was designed for use by all agencies when requesting approval from the Health Care Authority to add, terminate or change subscriber, spouse or dependent enrollment with an effective date older than 90 days (LOWER LIMIT DATE). When entering a retroactive transaction with a date older than 90 days, the message "**REQUIRES APPROVAL - SUBMIT REQUEST FOR APPROVAL ON THE A.56 SCREEN**" will be received on the screen. Please see the rules below regarding retroactive effective dates:

The HCA retro term policy implemented effective September 1, 1998 allows for terminations and changes only to the system's lower limit date.

- **For retroactive terms, divorce or deceased dates:** When entering a termination or a change, if you receive the error message "REQUIRES APPROVAL...ENTER REQUEST FOR APPROVAL ON THE A.56 SCREEN", do not enter invalid dates on line. Back out of the transaction by changing the command line to "A.56", type "A" (add) and press PF4. This will take you to the "A.56" screen where you will enter in the explanation and date for HCA to update on-line.

Note: If the A.56 request is to report the loss of eligibility for a spouse or dependent, please include the date the employee notified your agency of the event.

- **For adds and changes:** Adds and changes may be allowed prior to the lower limit date, subject to HCA's approval. Enter the add transaction with the requested date. If you receive the message, "REQUIRES APPROVAL... ..ENTER REQUEST FOR APPROVAL ON THE A.56 SCREEN", ***do not proceed with the update! Back out of the transaction and by changing the command line to "A.56", type "A" (add) and press PF4. This will take you to the A.56 screen to enter your request.***

Updates to the A.56 screen will generate a report for the HCA. The HCA will review the request and:

- 1) if approved, HCA will update the employee's record with the requested transaction. For Higher Ed, the transaction will appear on the agency's next D2025 report (transaction log) or
- 2) if the transaction cannot be keyed due to system limitations and requires manual adjustment or if the request is disapproved, HCA will send a copy of the request back to the agency with an explanation.

NOTE: *This screen can only be accessed by ENTERING an "A" in the TYPE field on the command line. To exit this screen, Press PF2 (RETURN) or ENTER another screen number in the NEXT FUNCTION field on the command line.*

SUBSCRIBER SSN:

Displays the subscriber's social security number.

NAME:

Displays the subscriber's name.

HOME AGENCY:

Displays home agency that is one the A.41 screen.

REQUESTOR NAME:

ENTER your name. HCA may need to contact you for more information regarding the request.

REQUESTOR PHONE:

ENTER your work phone number, including area code.

MAIL STOP:

ENTER your mail stop, if applicable.

REQUEST EXPLANATION:

ENTER a brief explanation of why this retroactive transaction is being requested. **BE SURE TO INCLUDE ALL OF THE DATA THAT HCA WILL NEED TO ENTER THIS TRANSACTION FOR YOU, INCLUDING THE REQUESTED EFFECTIVE DATE OF THE CHANGE.**

NOTE: You may view or change your request **only on the same day it was submitted**. To view your request, enter A.56 and type "I" (inquire) on the command line. If you should need to change or add to your original explanation, you must access the screen using "U" (update) on the command line, rather than "A" (add). Make your corrections in the REQUEST EXPLANATION field and press PF10 to update. **HCA will only receive the last request updated.**

HEALTH CARE AUTHORITY
REQUEST FOR HCA ON-LINE TRANSACTION

DATE: 04 / 18 / 2005

PAGE: 3

REQUESTOR NAME: MERRY PAYROLE

REQUESTOR PHONE: 360-555-2121

MAIL STOP: 42001

-----SUBSCRIBER INFORMATION-----

NAME: SMITH, PAMELA K. SSN: 555-88-1234

AGENCY: 540

AGENCY TITLE: EMPLOYMENT SECURITY

ELIGIBILITY TYPE: Y ACTIVE

HEALTH ENROLLED: Y HEALTH EFFECTIVE DATE: 01-01-2005

HEALTH CARRIER: U UNIFORM MEDICAL PLAN

DENTAL ENROLLED: Y DENTAL EFFECTIVE DATE: 09-01-1995

DENTAL CARRIER: 1 UNIFORM DENTAL PLAN

REQUEST EXPLANATION:

PLEASE ENTER DIVORCE DATE OF 09-15-2004 ON A.41 SCREEN THANK YOU..

HCA COMMENTS:

***Divorce date 09-15-2004 entered on A.41 screen.
Spouse changed to "X"***

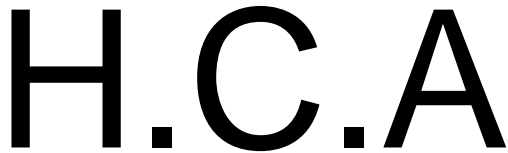
APPROVED: X

DISAPPROVED: _____

DATE CHANGES MADE: 04-19-05
G.F.

REPORTS

STATEMENT OF INSURANCE



STATEMENT OF INSURANCE
Y 107 507
AS OF 01/31/2006
WASHINGTON STATE HEALTH CARE AUTHORITY

THIS STATEMENT SUMMARIZES YOUR INSURANCE COVERAGES WITH THE HEALTH CARE AUTHORITY. IF THIS STATEMENT DISAGREES WITH YOUR, PLEASE CONTACT YOUR PERSONNEL/PAYROLL/INSURANCE OFFICE FOR ASSISTANCE. IF YOU ARE A RETIREE OR SELFPAY SUBSCRIBER, CALL 1-800-200-1004

SUBSCRIBER INFORMATION

EXAMPLE, PAMELA K
1234 STREET
OLYMPIA WA 98500

SOCIAL SECURITY ***-**-****
RESIDENT IN THURSTON COUNTY
BIRTH DATE IS 06-28-1975
MARITAL STATUS IS MARRIED 03-03-1986
GENDER IS FEMALE
AGENCY IS STATE AUDITORS OFFICE

SPOUSE AND DEPENDENT INFORMATION

	<u>NAME</u>	<u>SOCIAL SECURITY</u>	<u>BIRTHDATE</u>
SPOUSE	EXAMPLE, JOHN P	***-**-****	03-16-1963
DAUGHTER	EXAMPLE, TIFFANY ANN	***-**-****	05-02-1987

HERE ARE YOUR HCA SPONSORED COVERAGES:

MEDICAL COVERAGE PROVIDED BY GROUP HEALTH

DENTAL COVERAGE PROVIDED BY UNIFORM DENTAL PLAN

TOTAL MONTHLY EMPLOYEE PREMIUM \$151.00

HCA LIFE INSURANCE COVERAGES (NON-SMOKER RATES)

PART A	\$25,000	SUBSCRIBER BASIC LIFE, \$5,000 AD & D
PART B	\$2,500	SPOUSE / PER DEPENDENT
PART B	\$25,000	SUPPLEMENTAL SPOUSE LIFE
PART C	\$54,000	SUBSCRIBER OPTIONAL LIFE
PART D	\$50,000	SUBSCRIBER SUPPLEMENTAL LIFE
PART E	\$100,000	SUBSCRIBER OPTIONAL A D & D WITH DEPENDENTS

TOTAL MONTHLY LIFE PREMIUM \$ 7.96

HCA LONG TERM DISABILITY INSURANCE COVERAGES

- BASIC LTD WITH 90 DAY WAITING PERIOD
- OPTIONAL LTD WITH 30 DAY WAITING PERIOD

* THIS IS NOT A BILL

THIS STATEMENT IS NOT A GUARANTEE OF INSURANCE. IT IS INTENDED TO BE A STATEMENT OF RECORD OF YOUR ENROLLMENT. THE INSURANCE COVERAGE IS GOVERNED BY THE INSURANCE CONTRACT OR CERTIFICATE OF COVERAGE.

AUTOMATIC TERMINATION REPORT

REPORT NO: HRISDB5020-R02
RUN CYCLE: CYCLE 02

STATE OF WASHINGTON
HEALTH CARE AUTHORITY

RUN DATE: 01/31/2006
PAGE: 2

AUTOMATIC TERMINATIONS

₁AGENCY: 360 - UNIVERSITY OF WASHINGTON
SUB-AGENCY:

*****SUBSCRIBER*****		*****DEPENDENT*****			ELIG	
₂ NAME	₃ SSN	₄ NAME	₅ SSN	₆ RELATIONSHIP	END DATE	TERM REASON
SMITH, JANE A	123-456-7891	SMITH, MIKE	987 654 3219	SON	₇ 01/31/2006	₈ 20 YRS OLD
JOHNSON, BILL	456 789 3219	JOHNSON, MEL	789 654 3218	SON	01/31/2006	CERT END DATE
ANDERS, JOHN	963 852 7415	ANDERS, SAM	741 852 9637	SON	01/31/2006	CERT END DATE

DESCRIPTION: This report displays: Dependent children who have reached the age of 20 and students, extended dependent children & disabled dependents whose certification has expired or have reached maximum dependent eligibility age of 24. The report may be used by insurance only agencies to make possible adjustments in their own payroll systems. Listed below are the elements displayed on the report:

- | | |
|--|--|
| 1. Agency/Sub-agency Code | 6. Dependent Relationship |
| 2. Employee/Retiree Name | 7. Eligibility End Date - The insurance system will automatically terminate coverage on these dependents with this date. The Health Care Authority will notify the terminated employee and dependent of their COBRA rights. |
| 3. Employee/Retiree Social Security Number | 8. Termination Reason - Will be identified as "20 years old" or "certification end date" |
| 4. Dependent Name | |
| 5. Dependent Social Security Number | |

CITY-COUNTY CODE LIST

ABERDEEN-Grays Harbor-14	ACNE-Whatcom-37	ACTON-Benton-3	ADCO-Grant-13
ADDY-Stevens-33	ADELAIDE-King-17	ADKINS-Walla Walla-36	ADNA-Lewis-21
ADRIAN-Grant-13	AERO-Clallam-5	AGAVE BAY-Whatcom-37	AGNEW-Clallam-5
AIRWAY HEIGHTS-Spokane-32	AJLUNE-Lewis-21	ALAMEDA-Douglas-9	ALBION-Whitman-38
ALDER-Pierce-27	ALDERDALE-Klickitat-20	ALDERTON-Pierce-27	ALDERWOOD MANOR-Snohomish-31
ALFALFA-Yakima-39	ALGONA-King-17	ALLARD-Benton-3	ALLEN-Skagit-29
ALLISON-Pierce-27	ALLYN-Mason-23	ALMIRA-Lincoln-22	ALMOTA-Whitman-38
ALOHA-Grays Harbor-14	ALPHA-Lewis-21	ALPHINE-King-17	ALPOWA-Whitman-38
ALSTOWN-Douglas-9	ALTO-Columbia-7	ALTONNA-Wahkiakum-35	AMANDA PARK-Grays Harb-14
AMBER-Spokane-32	AMBOY-Clark-6	AMERICAN LAKE-Pierce-27	AMERICAN RIVER-Yakima-39
ANACORTES-Skagit-29	ANATONE-Asotin-2	ANGLIN-Okanogan-24	ANKENY-Adams-1
ANYWYNE-Okanogan -24	APPLEDALE-Douglas-9	APPLETON-Klickitat-20	APPLEYARD-Chelan-4
ARDEN-Stevens-33	ARDENVOIR-Chelan-4	ARIEL-Cowlitz-8	ARLINGTON-Snohomish-31
ARTIE-Grays Harbor-14	ASH-Walla Walla-36	ASHBY-Adams-1	ASHFORD-Pierce-27
ASHTIN-Asotin-2	ASNEAS-Okanogan-24	ATTALIA-Walla Walla-36	AUBURN-King-17
AUSTIN-Island-15	AVERY-Klickitat-20	AVON-Skagit-29	AYER-Skagit-29
AZWELL-Chelan-4	BABCOCK-Walla Walla-36	BACON-Grant-13	BADGER-Benton-3
BAINBRIDGE IS-Kitsap-18	BAIRD-Douglas-9	BALDI-King-17	BALFOUR-Whatcom-37
BALKENA-Pend Oreille-26	BANDERA-King-17	BANGOR-Kitsap-18	BARBERTON-Clark-6
BARING-King-17	BARKER-Okanogan-24	BARNESTON-King-17	BARRINGTON-Snohomish-31
BARRY-Douglas-9	BARSTON-King-17	BAS POINT-Pierce-27	BASSET JUNCTION-Grant-13
BATTLE GROUND-Clark-6	BATUM-Adams-1	BAY CENTER-Pacific-25	BAY CITY-Grays Harbor-14
BAY VIEW-Skagit-29	BAYNE-King-17	BEACH-Whatcom-37	BEAR CREEK-Chelan-4
BEATRICE-Adams-1	BEAUX ARTS-King-17	BEAVER-Clallam-5	BEDFORD-Pacific-25
BEE-Pierce-27	BEEBE-Douglas-9	BEER PARK-Spokane-32	BELFAIR-Mason-23
BELL-Spokane-32	BELLEVILLE-Skagit-29	BELLEVUE-King-17	BELLINGHAM-Whatcom-37
BELLPLAIN-Pierce-27	BELMONT-Whitman-38	BELMORE-Thurston-34	BENCH-Yakima-39
BEND-Grant-13	BENGE-Adams-1	BENTON CITY-Benton-3	BERKLEY-Pierce-27
BERNE-Chelan-4	BERRIAN-Benton-3	BERRYDALE-King-17	BERRYMAN-Walla Walla-36
BEVERLY PARK-Snohomish-31	BEVERLY-Grant-13	BIARLY-Stevens-33	BICKLETON-Klickitat-20
BIGLAKE-Skagit-29	BINGEN-Klickitat-20	BIRCH BAY-Whatcom-37	BIRCHFIELD-Yakima-39
BIRDSVIEW-Skagit-29	BISHOP-Whitman-38	BISSELL-Stevens-33	BLACK CARBON-Pierce-27
BLACK DIAMOND-King-17	BLACK RIVER-King-17	BLACKROCK-Yakima-39	BLAINE-Whatcom-37
BLANCHARD-Skagit-29	BLOCKHOUSE-Klickitat-20	BLUE CREEK-Stevens-33	BLUESLIDE-Pend Oreille-26
BLUESTEM-Lincoln-22	BLYNE-Clallam-5	BOISTFORT-Lewis-21	BOLLES-Walla Walla-36
BOLSTER-Okanogan-24	BONLOW-Yakima-39	BONNEY LAKE-Pierce-27	BOONE-Yakima-39
BORDEAUX-Thurston-34	BOSSBURG-Stevens-33	BOTHELL-King-17	BOUNDARY-Stevens-33
BOW-Skagit-29	BOYDS-Ferry-10	BOYLSTON-Kittitas-19	BRACE-Yakima-39
BRADY-Grays Harbor-14	BREAKERS-Pacific-25	BREMERTON-Kitsap-18	BREWSTER-Okanogan-24
BRIDGEPORT-Okanogan-24	BRIEF-Chelan-4	BRINNON-Jefferson-16	BRIQUETVILLE-King-17
BRISTOL-Kittitas-19	BROOKDALE-Pierce-27	BROOKFIELD-Walla Walla-36	BROOKLYN-Pacific-25
BROWNSTCWN-Yakima-39	BROWNSVILLE-Kitsap-18	BRUCE-Adams-1	BRUSH PRAIRIE-Clark-6
BRYANT-Snohomish-31	BRYN MAWR-King-17	BUCKEYE-Spokane-32	BUCKLEY-Pierce-27
BUCODA-Thurston-34	BUENA-Yakima-39	BULLFROG-Kittitas-19	BUNKER-Lewis-21
BURBANK-Walla Walla-36	BURIEN-King-17	BURLEY-Kitsap-18	BURLINGTON-Skagit-29
BURNETT-Pierce-27	BUROKER-Walla Walla-36	BURROWS-Grays Harbor-14	BURT-Pacific-25
BURTON-King-17	BYRON-Yakima-39	CAMANO-Island-15	CAMAS-Clark-6
CAMDEN-Pend Oreille-26	CAMP MURRAY-Pierce-27	CAMP SELAH-King-17	CAMP TALBOT-Jefferson-16
CAMPTON-King-17	CANBY-Lincoln-22	CAPE HORN-Skamania-30	CARBONADO-Pierce-27
CARDERS-Spokane-32	CARLEY-Benton-3	CARLISLE-Grays Harbor-14	CARLSBERG-Clallam-5
CARLTON-Okanogan-24	CARNATION-King-17	CAROLLS-Cowlitz-8	CARSON-Skamania-30
CASEY-Walla Walla-36	CASHMERE-Chelan-4	CASTLE ROCK-Cowlitz-8	CASTLETON-Whitman-38
CATHLAMET-Wahkiakum-35	CEDAR CREEK-Whitman-38	CEDAR FALLS-King-17	CEDAR VALLEY-Snohomish-31
CEDONIA-Stevens-33	CENTER-Jefferson-16	CENTERVILLE-Klickitat-20	CENTRAL Ferry-Garfield-12
CENTRAL PARK-Grays Harb-14	CENTRALIA-Lewis-21	CERES-Lewis-21	CHAMBER-Yakima-39
CHAMBERS PRARIE-Pierce-27	CHANDLER-Benton-3	CHARD-Garfield-12	CHARLESTON-Kitsap-18
CHATTAROY-Spokane-32	CHEHALIS-Lewis-21	CHELAN FALLS-Chelan-4	CHELAN-Chelan-4
CHENEY-Spokane-32	CHENOIS-Grays Harbor-14	CHEROKEE-Okanogan-24	CHESAW-Okanogan-24
CHESTER-Spokane-32	CHEVY CHASE-Jefferson-16	CHEW-Walla Walla-36	CHEWELAH-Stevens-33
CHILOWIST-Okanogan-24	CHIMACUM-Jefferson-16	CHINOOK-Pacific-25	CHOPKA-Okanogan-24
CINEBAR-Lewis-21	CLALLAM BAY-Clallam-5	CLARKSTON-Asotin-2	CLAYTON-Stevens-33
CLE ELUM-Kittitas-19	CLEARLAKE-Skagit-29	CLEARVIEW-Snohomish-31	CLEARWATER-Jefferson-16
CLIFFS-Klickitat-20	CLINTON-Island-15	CLIPPER-Whatcom-37	CLOVERLAND-Asotin-2
COLBERT-Spokane-32	COLBY-Kitsap-18	COLFAX-Whitman-38	COLLEGE PL-Walla Walla-36
COLTON-Whitman-38	COLVILLE-Stevens-33	CONCONULLY-Okanogan-24	CONCRETE-Skagit-29

CONNELL-Franklin-11	CONWAY-Skagit-29	COOK-Skamania-30	COPALIS BCH-Grays Harbor-14
COPALIS CROSS-Grays Harb14	COSMOPOLIS-Grays Harbor-14	COUGAR-Cowlitz-8	COULEE CITY-Grant-13
COULEE DAM-Douglas-9	COUNTRY HOMES-Spokane-32	COUPEVILLE-Island-15	COVADE-Ferry-10
COVE-King-17	COVINGTON-17	COWICHE-Yakima-39	CRAIGE-Asotin-2
CREOSOTE-Kitsap-18	CRESTON-Lincoln-22	CREWPORT-Yakima-39	CUMBERLAND-King-17
CUNNINGHAM-Adams-1	CURLEW-Ferry-10	CURTIS-Lewis-21	CUSICK-Pend Oreille-26
CUSTER-Whatcom-37	DABOB-Jefferson-16	DAISY-Stevens-33	DALLESPOrt-Klickitat-20
DANVILLE-Ferry-10	DAVENPORT-Lincoln-22	DAYTON-Columbia-7	DECATUR-San Juan-28
DEEP HARBOR-San Juan-28	DEEP RIVER-Wahkiakum-35	DEEPCREEK-Spokane-32	DEL RIO-Douglas-9
DEMING-Whatcom-37	DENISON-Spokane-32	DESERT AIR-Grant-13	DES MOINES-King-17
DIAMOND-Whitman-38	DIERINGER-Pierce-27	DISAUTEL-Okanogan-24	DISHMAN-Spokane-32
DIXIE-Walla Walla-36	DOCTON-King-17	DOEBAY-San Juan-28	DOMINION-Stevens-33
DONALD-Yakima-39	DOTY-Lewis-21	DOUGLAS-Douglas-9	DRYAD-Lewis-21
DRYDEN-Chelan-4	DU PONT-Pierce-27	DUNGENESS-Clallam-5	DUSTY-Whitman-38
DUVALL-King-17	EARLINGTON-King-17	EAST FARMS-Spokane-32	EAST OLYMPIA-Thurston-34
EAST SOUND-San Juan-28	E. STANWOOD-Snohomish-31	EAST WENATCHEE-Douglas-9	EASTON-Kittitas-19
EATONVILLE-Pierce-27	EDGECOMB-Snohomish-31	EDGEWOOD-Pierce-27	EDISON-Skagit-29
EDMONDS-Snohomish-31	EDWALL-Lincoln-22	EGLON-Kitsap-18	ELBE-Pierce-27
ELBERTON-Whitman-38	ELECTRIC CITY-Grant-13	ELECTRON-Pierce-27	ELGIN-Pierce-27
ELK-Spokane-32	ELLENBOURG-Kittitas-19	ELLISPORT-King-17	ELMA-Grays Harbor-14
ELMER CITY-Okanogan-24	ELTOPIA-Franklin-11	ENDICOTT-Whitman-38	ENTIAT-Chelan-4
ENUMCLAW-King-17	EPHRATA-Grant-13	ESPANOLA-Spokane-32	ETHEL-Lewis-21
EUREKA-Walla Walla-36	EVANS-Stevens-33	EVERETT-Snohomish-31	EVERSON-Whatcom-37
EWAN-Whitman-38	FAIRCHILD-Spokane-32	FAIRFAX-Pierce-27	FAIRFIELD-Spokane-32
FALL CITY-King-17	FARMER-Douglas-9	FARMINGTON-Whitman-38	FEDERAL WAY-King-17
FERNDAL-Whatcom-37	FERRY-Ferry-10	FIFE-Pierce-27	FIRCREST-Pierce-27
FISHTRAP-Lincoln-22	FLETCHER BAY-Kitsap-18	FLORENCE-Snohomish-31	FORD-Stevens-33
FOREST CITY-Kitsap-18	FORKS-Clallam-5	FORT Lewis-Pierce-27	FORT STEILACOOM-Pierce-27
FORTSON-Snohomish-31	FOUR LAKES-Spokane-32	FOX ISLAND-Pierce-27	FRAGARIA-Kitsap-18
FRANCES-Pacific-25	FREELAND-Island-15	FREEMAN-Spokane-32	FRIDAY HARBOR-San Juan-28
FRUITLAND-Stevens-33	FURPORT-Pend Oreille-26	GALVIN-Lewis-21	GARDINER-Jefferson-16
GARFIELD-Whitman-38	GATE-Thurston-34	GEROME-Stevens-33	GERTRUDE-Pierce-27
GIFFORD-Stevens-33	GIG HARBOR-Pierce-27	GLACIER-Whatcom-37	GLEED-Yakima-39
GLENDALE-Island-15	GLENOMA-Lewis-21	GLENWOOD-Klickitat-20	GOLDBAR-Snohomish-31
GOLDENDALE-Klickitat-20	GOODNOE HILLS-Klickitat-20	GOOSE PRAIRIE-Yakima-39	GORST-Kitsap-18
GOVAN-Lincoln-22	GRAHAM-Pierce-27	GRAND COULEE-Grant-13	GRAND MOUND-Thurston-34
GRAND ORCHARDS-Grant-13	GRANDVIEW-Yakima-39	GRANGER-Yakima-39	GRANITE FALLS-Snohomish-31
GRAPEVIEW-Mason-23	GRAYLAND-Grays Harbor-14	GRAYS RIVER-Wahkiakum-35	GREENACRES-Spokane-32
GREENBANK-Island-15	GROTTO-King-17	GULER-Klickitat-20	HAAS-Walla Walla-36
HADLOCK-Jefferson-16	HAMILTON-Skagit-29	HANFORD-Benton-3	HANSVILLE-Kitsap-18
HARPER-Kitsap-18	HARRAH-Yakima-39	HARRINGTON-Lincoln-22	HARTFORD-Snohomish -31
HARTLINE-Grant-13	HATTON-Adams-1	HAVILLAH-Okanogan-24	HAY-Whitman-38
HEISSON-Clark-06	HELLGATE-Ferry-10	HIGH POINT-King-17	HOBART-King-17
HOLCOMB-Pacific-25	HOLDEN-Chelan-4	HOME VALLEY-Skamania-30	HOODSPORT-Mason-23
HOOPER-Whitman-38	HOQUIAM-Grays Harbor-14	HOUGHTON-King-17	HOVER-Benton-3
HUMPTULIPS-Grays Harbor-14	HUNTERS-Stevens-33	HUNTSVILLE-Columbia-7	HUSUM-Klickitat-20
HYAK-Kittitas-19	ILWACO-Pacific-25	IMPACH-Ferry-10	INCHELIUM-Ferry-10
INDEPENDENCE-Thurston-34	INDEX-Snohomish-31	IONE-Pend Oreille-26	IRBY-Lincoln-22
ISSAQUAH-King-17	JARED-Pend Oreille-26	JOHNSON-Whitman-39	JOYCE-Clallam-5
JUANITA-King-17	JUNCTION CITY-Grays Harbor-14	KAHLOTUS-Franklin-11	KALALOH-Jefferson-16
KALAMA-Cowlitz-8	KAPOSIN-Pierce-27	KARTAT-Okanogan-24	KELLER-Ferry-10
KELSO-Cowlitz-8	KENMORE-King-17	KENNEWICK-Benton-3	KENNYDALE-King-17
KENT-King-17	KETTLE FALLS-Stevens-33	KEWA-Ferry-10	KEYPORT-Kitsap-18
KINGSTON -Kitsap-18	KIONA-Benton-3	KIRKLAND-King-17	KITSAP-Kitsap-18
KITTITAS-Kittitas-19	KLABER-Lewis-21	KLICKITAT-Klickitat-20	KNAPPTON-Pacific-25
KOSMOS-Lewis-21	LA CENTER-Clark-6	LACEY-Thurston-34	LACONNER-Skagit-29
LACROSSE-Whitman-38	LAFLEUR-Okanogan-24	LAGRANDE-Pierce-27	LAKE Stevens-Snohomish-31
LAKEBAY-Pierce-27	LAKESIDE-Chelan-4	LAKEVIEW-Pierce-27	LAKEWOOD-Pierce-27
LAMONOA-Lincoln-22	LAMONT-Whitman-38	LANCASTER-Whitman-38	LANGLEY-Island-15
LAPUSH-Clallam-5	LATAH-Spokane-32	LAUREL-Klickitat-20	LAURIER-Ferry-10
LEADPOINT-Stevens-33	LEAHY-Douglas-9	LEAVENWORTH-Chelan-4	LEBAM-Pacific-25
LELAND-Jefferson-16	LESTER-King-17	LIBERTY LAKE-Spokane-32	LIBERTY-Kittitas-19
LILLIWAP-Mason-23	LINCOLN-Lincoln-22	LIND-Adams-1	LITTLE ROCK-Thurston-34
LOCKE-Pend Oreille-26	LONG BEACH-Pacific-25	LONG BRANCH-Pierce-27	LONGMIRE-Pierce-27
LONGVIEW-Cowlitz-8	LOOMIS-Okanogan-24	LOON LAKE-Spokane-32	LOPEZ-San Juan-28
LOST CREEK-Pend Oreille-26	LOWDEN-Walla Walla-36	LOWELL-Snohomish-31	LUCERNE-Chelan-4

LUMMI-Whatcom-37	LYLE-Klickitat-20	LYMAN-Skagit-29	LYNDEN-Whatcom-37
LYNNWOOD-Snohomish-31	MABTON-Yakima-39	MACALL-Adams-1	MACHIAS-Snohomish-31
MAE-Grant-13	MAGNOLIA BEACH-King-17	MALAGA-Chelan-4	MALDEN-Whitman-38
MALO-Ferry-10	MALONE-Grays Harbor-14	MALOTT-Okanogan-24	MALTBY-Snohomish-31
MANCHESTER-Kitsap-18	MANETTE-Kitsap-18	MANSFIELD-Douglas-9	MANSON-Chelan-4
MAPLE FALLS-Whatcom-37	MAPLE VALLEY-King-17	MARBEL-Stevens-33	MARBLE MOUNT-Skagit-29
MARCUS-Stevens-33	MARENGO-Adams-1	MARIETTA-Whatcom-37	MARKHAM-Grays Harbor-14
MARLIN-Grant-13	MARSHALL-Spokane-32	MARYHILL-Klickitat-20	MARYSVILLE-Snohomish-31
Mason CITY-Okanogan-24	MATLOCK-Mason-23	MATTAWA-Grant-13	MAY VIEW-Garfield-12
MAYFIELD-Lewis-21	MAZAMA-Okanogan-24	MCCLEARY-Grays Harbor-14	MCGOWAN-Pacific-25
MCKENNA-Pierce-27	MCMILLIN-Pierce-27	MCMURRAY-Skagit-29	MEAD-Spokane-32
MEADOWDALE-Snohomish-31	MEDICAL LAKE-Spokane-32	MEDINA-King-17	MELBOURNE-Grays Harbor-14
MENLO-Pacific-25	MERCER ISLAND-King-17	MERIDIAN-Pierce-27	MERRIT-Chelan-4
MESA-Franklin-11	METALINE FALLS-Pend Or-26	METALINE-Pend Oreille-26	METHOW-Okanogan-24
MEYERS FALLS-Stevens-33	MICA-Spokane-32	MIDWAY-King-17	MILAN-Spokane-32
MILES-Stevens-33	MILLWOOD-Spokane-32	MILL CREEK-Snohomish-31	MILTON-Pierce-27
MINERAL-Lewis-21	MIRROR LAKE-King-17	MOCLIPS-Grays Harbor-14	MOHLER-Lincoln-22
MOLD-Douglas-9	MOLSON-Okanogan-24	MONDOVI-Lincoln-22	MONITOR-Chelan-4
MONROE-Snohomish-31	MONSE-Okanogan-24	MONTBORNE-Skagit-29	MONTESANO-Grays Harbor-14
MOORE-Chelan-4	MORA-Clallam-5	MORTON-Lewis-21	MOSES LAKE-Grant-13
MOSSYROCK-Lewis-21	MOTTINGER-Benton-3	MOUNT HOPE-Spokane-32	MOUNT VERNON-Skagit-29
MOUNTAIN VIEW-Asotin-2	MOXEE CITY-Yakima-39	MT LK TERRACE-Snohomish-31	MUKILTEO-Snohomish-31
NACHES-Yakima-39	NAGROM-King-17	NAHCOTTA-Pacific-25	NAPAVINE-Lewis-21
NASELLE-Pacific-25	NATIONAL-Pierce-27	NEAH BAY-Clallam-5	NEILTON-Grays Harbor-14
NEPPEL-Grant-13	NESPELEM-Okanogan-24	NEWMAN LAKE-Spokane-32	NEWCASTLE - King-17
NEWPORT-Pend Oreille-26	NIGHTHAWK-Okanogan-24	NINE MILE FALLS-Spokane-32	NISQUALLY-Thurston-34
NOOKSACK-Whatcom-37	NORDALES-Klickitat-20	NORDLAND-Jefferson-16	NORMAN-Snohomish-31
NORTH BENO-King-17	N BONNEVILLE-Skamania-30	NORTH COVE-Pacific-25	NORTH PORT-Stevens-33
OAK HARBOR-Island-15	OAK POINT-Cowlitz-8	OAKESDALE-Whitman-38	OAKVILLE-Grays Harbor-14
OCEAN PARK-Pacific-25	OCEAN SHORES-Grays Harbor-14	ODESSA-Lincoln-22	OHOP-Pierce-27
OKANOGAN-Okanogan-24	OLLALA-Kitsap-18	OLGA-San Juan-28	OLYMPIA-Thurston-34
OMAK-Okanogan-24	ONALASKA-Lewis-21	OPPORTUNITY-Spokane-32	ORCAS-San Juan-28
ORCHARDS-Clark-6	ORIENT-Ferry-10	ORILLIA-King-17	ORIN-Stevens-33
ORONDO-Douglas-9	OROVILLE-Okanogan-24	ORTING-Pierce-27	OSBORNE-Grant-13
OSO-Snohomish-31	OSTRANDER-Cowlitz-8	OTHELLO-Adams-1	OTIS ORCHARDS-Spokane-32
OUTLOOK-Yakima-39	OVINGTON-Clallam -5	OYSTERVILLE-Pacific-25	OZETTE-Clallam-5
PACIFIC BEACH-Grays Harb-14	PACIFIC-King-17	PACKWOOD-Lewis-21	PAGE-Franklin-11
PAHA-Adams-1	PALISADES-Douglas-9	PALMER-King-17	PALOUSE-Whitman-38
PARADISE INN-Pierce-27	PARK RAPIDS-Stevens-33	PARKER-Yakima-39	PARKLAND-Pierce-27
PARKWATER-Spokane-32	PARKWAY-Pierce-27	PASCO-Franklin-11	PATAHA-Garfield-12
PATEROS-Okanogan-24	PATERSON-Benton-3	PE ELL-Lewis-21	PEACH-Lincoln-22
PEARSON-Kitsap-18	PENAWAWA-Whitman-38	PESHASTIN-Chelan-4	PINE CITY-Whitman-38
PINEHURST-Snohomish-31	PLAZA-Spokane-32	PLUM-Lincoln-22	PLYMOUTH-Benton-3
POINT ROBERTS-Whatcom-37	POMEROY-Garfield-12	POMONA-Yakima-39	PORT ANGELES-Clallam-5
PORT BLAKELY-Kitsap-18	PORT GAMBLE-Kitsap-18	PORT HADLOCK-Jefferson-16	PORT LUDLOW-Jefferson-16
PORT MADISON-Kitsap-18	PORT ORCHARD-Kitsap-18	PORT STANLEY-San Juan-28	PT TOWNSEND-Jefferson-16
PORTAGE-King-17	PORTER-Grays Harbor-14	POSSESSION-Island-15	POTLATCH-Mason-23
POULSBO-Kitsap-18	PRESCOTT-Walla Walla-36	PRESTON-King-17	PREVOST-San Juan-28
PRIEST RAPIDS-Yakima-39	PRINDLE-Skamania-30	PROSSER-Benton-3	PULLMAN-Whitman-38
PURDY-Pierce-27	PUYALLUP-Pierce-27	PYSHT-Clallam-5	QUEETS-Jefferson-16
QUILCENE-Jefferson-16	QUILLAYTE-Clallam-5	QUINAULT-Grays Harbor-14	QUINCY-Grant-13
RAINIER-Thurston-34	RALSTON-Adams-1	RANDLE-Lewis-21	RAVENSDALE-King-17
RAYMOND-Pacific-25	REARDAN-Lincoln-22	REDNOND-King-17	REDONDO-King-17
RENTON-King-17	REPUBLIC-Ferry-10	RETSIL-Kitsap-18	RICE-Stevens-33
RICHARDSON-San Juan-28	RICHLAND-Benton-3	RICHMOND BEACH-King-17	RICHMOND HIGHL-King-17
RIDGEFIELD-Clark-6	RIFFE-Lewis-21	RINGOLD-Franklin-11	RIPARIA-Whitman-38
RITZVILLE-Adams-1	RIVERSIDE-Okanogan-24	ROBE-Snohomish-31	ROCHE HARBOR-San Juan-28
ROCHESTER-Thurston-34	ROCK ISLAND-Douglas-9	ROCKFORD-Spokane-32	ROCKLYN-Lincoln-22
ROCKPORT-Skagit-29	ROGERSBURG-Asotin-2	ROLLINGSBAY-Kitsap-18	RONALD-Kittitas-19
ROOSEVELT-Klickitat-20	ROSALIA-Whitman-38	ROSARIO-San Juan-28	ROSBURG-Wahkiakum-35
ROSLYN-Kittitas-19	ROXBORO-Adams-1	ROY-Pierce-27	ROYAL CITY-Grant-13
RUBY-Pend Oreille-26	RUFF-Grant-13	RYDERWOOD-Cowlitz-8	SAINT ANDREWS-Douglas-9
SAINT JOHN-Whitman-38	SALKUM-Lewis-21	SAM-Douglas-9	SAMMAMISH-King-17
SANDE FUCA-Island-15	SAPPHO-Clallam-5	SATSOP-Grays Harbor-14	SATUS-Yakima-39
SAUK-Skagit-29	SCENIC-King-17	SCOTIA-Pend Oreille-26	SEABECK-Kitsap-18
SEABOLD-Kitsap-18	SEAHURST-King-17	SEATTLE HEIGHTS-King-17	SEATTLE-King-17

SEAVIEW-Pacific-25	SEDRO WOOLLEY-Skagit-29	SEKIU-Clallam-5	SELAH-Yakima-39
SELLECK-King-17	SEQUIM-Clallam-5	SHARON-Spokane-32	SHAW ISLAND-San Juan-28
SHELTON-Mason-23	SHORELINE-King-17	SILVANA-Snohomish-31	SILVERCREEK-Lewis-21
SILVERDALE-Kitsap-18	SILVERLAKE-Cowlitz-8	SILVERTON-Snohomish-31	SKAMANIA-Snohomish-31
SKAMOKAWA-Wahkiakum-35	SKYKOMISH-King-17	SMYRNA-Grant-13	SNAKE RIVER-Franklin-11
SNOHOMISH-Snohomish-31	SNOQUALMIE-King-17	SOAP LAKE-Grant-13	SOUTH BEND-Pacific-25
SOUTH COLBY-Kitsap-18	SOUTH PPAIRIE-Pierce-27	SOUTH WENATCHEE-Chelan-4	SOUTHWORTH-Kitsap-18
SPANAWAY-Pierce-27	SPANGLE-Spokane-32	SPIRIT LAKE-Skamania-30	SPOKANE BRIDGE-Spokane-32
SPOKANE-Spokane-32	SPRAGUE-Lincoln-22	SPRING BEACH-King-17	SPRING VALLEY-Spokane-32
SPRINGDALE-Stevens-33	STANWOOD-Snohomish-31	STARBUCK-Columbia-7	STARTUP-Snohomish-31
STCHEKEN-Chelan-4	STEILACOOM-Pierce-27	STEPTOE-Whitman-38	STEVENSON-Skamania-30
STRATFORD-Grant-13	SULTON-Snohomish-31	SUMAS-Whatcom-37	SUMNER-Pierce-2,r
SUNDALE-Klickitat-20	SUNNYSIDE-Yakima-39	SUNSET-Whitman-38	SUQUAMISH-Kitsap-18
SWAMP TREEK-Snohomish-31	SYLVAN-Pierce-27	SYNAREP-Okanogan-24	TACOMA-Pierce-27
TAHOLA-Grays Harbor-14	TAHUYA-Mason-23	TATOOSH-Clallam-5	TAYLOR-King-17
TEKOA-Whitman-38	TELM-Chelan-4	TEMENTWA-Okanogan-24	TENINO-Thurston-34
THATCHER-San Juan-28	THORP-Kittitas-19	THORTON-Whitman-38	TIETON-Yakima-39
TIGER-Pend Oreille-26	TILLCUM-Pierce-27	TOKELAND-Pacific-25	TOLEDO-Lewis-21
TONASKET-Okanogan-24	TOPPENISH-Yakima-39	TOUCHET-Walla Walla-36	TOUTLE-Cowlitz-8
TRACYTON-Kitsap-18	TRENTWOOD-Spokane-32	TRINIDAD-Grant-13	TROUTDALE-Klickitat-20
TUKWILA-King-17	TULALIP-Snohomish-31	TUMTUM-Stevens-33	TUMWATER-Thurston-34
TWIN-Clallam-5	TWISP-Okanogan-24	TYLER-Spokane-32	UNDERWOOD-Skamania-30
UNION GAP-Yakima-39	UNION-Mason-23	UNIONTOWN-Whitman-38	UNIVERSITY PLACE-Pierce-27
URBAN-Skagit-29	USK-Pend Oreille-26	VADER-Lewis-21	VAIL-Thurston-34
VALLEY-Stevens-33	VALLEYFORD-Spokane-32	VAN ZANOT-Whatcom-37	VANCOUVER-Clark-6
VANTAGE-Kittitas-19	VASHON-King-17	VAUGHN-Pierce-27	VEGA-Pierce-27
VERABALE-Spokane-32	VERNITA-Benton-3	WAHKIACUS-Klickitat-20	WAHLUKE-Grant-13
WAITSBURG-Walla Walla-36	WALDRON-San Juan-28	WALLA WALLA-Walla Walla-36	WALLGREN-Whatcom-37
WALLULA-Walla Walla-36	WAPATO-Yakima-39	WARDEN-Grant-13	WARM BEACH-Snohomish-31
WASHOUGAL-Clark-6	WASHTUCNA-Adams-1	WATERVILLE-Douglas-9	WAUCONDA-Okanogan-24
WAUKON-Lincoln-22	WAUNA-Pierce-27	WAVERLY-Spokane-32	WAWAWAI-Whitman-38
WELLPINIT-Stevens-33	WENATCHEE-Chelan-4	WEST RICHLAND-Benton-3	WEST SOUND-San Juan-28
WESTPORT-Grays Harbor-14	WHEELER-Grant-13	WHITE BLUFFS-Benton-3	WHITE SALMON-Klickitat-20
WHITE SWAN-Yakima-39	WHITES-Grays Harbor-14	WICKERSHAM-Whatcom-37	WILBUR-Lincoln-22
WILKESON-Pierce-27	WILLAPA-Pacific-25	WILLARD-Skamania-30	WILSON CREEK-Grant-13
WINCHESTER-Grant-13	WINESAP-Chelan-4	WINLOCK-Lewis-21	WINONA-Whitman-38
WINSLOW-Kitsap-18	WINTHROP-Okanogan-24	WINTON-Chelan-4	WISHRAM-Klickitat-20
WITHROW-Douglas-9	WOODINVILLE-King-17	WOODLAND-Cowlitz-8	WYNER-Kittitas-19
YACOLT-Clark-6	YAKE-Cowlitz-8	YAKIMA-Yakima-39	YARDLEY-Spokane-32
YELM-Thurston-34	YOMAN-Pierce-27	ZENITH-King-17	ZILLAH-Yakima-39

NOTES

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This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.